

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098790

FILED  
Feb 16, 2009  
Secretary of State

Entity Name: BLOOMINGDALE PROFESSIONALS LLC

**Current Principal Place of Business:**

3447 BROOK CROSSING DR  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

3447 BROOK CROSSING DR  
BRANDON, FL 33511

**New Mailing Address:**

FEI Number: 20-5715548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PHILLIPS, LAURA  
2316 EAGLE BLUFF DR.  
VALRICO, FL 33594 US

**Name and Address of New Registered Agent:**

PHILLIPS, LAURA  
2316 EAGLE BLUFF DR.  
VALRICO, FL 33596 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PHILLIPS, LAURA  
Address: 2316 EAGLE BLUFF DR.  
City-St-Zip: VALRICO, FL 33596

Title: MGRM ( ) Delete  
Name: HAMILTON, GREGORY  
Address: 1604 3RD ST. CIRCLE E.  
City-St-Zip: PALMETTO, FL 34221

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAURA PHILLIPS

MGRM

02/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date