

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Apr 29, 2009
Secretary of State**

DOCUMENT# L06000099577

Entity Name: MID-FLORIDA GASTROENTEROLOGY CONSULTANTS, LLC

Current Principal Place of Business:

New Principal Place of Business:

10000 WEST COLONIAL DR.
SUITE 389
OCOEE, FL 34761 US

Current Mailing Address:

New Mailing Address:

10000 WEST COLONIAL DR.
SUITE 389
OCOEE, FL 34761 US

FEI Number: 20-5689196 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MASTALI, MOHAMMAD R
10000 WEST COLONIAL DR.
SUITE 389
OCOEE, FL 34761 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: MASTALI, MOHAMMAD R
Address: 10000 WEST COLONIAL DR. SUITE 389
City-St-Zip: OCOEE, FL 34761 US

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: MOHAMMAD R. MASTALI

MGRM

04/29/2009

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