2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2008
Secretary of State

DOCUMENT# L06000104597

Entity Name: SUNCOAST MEADOWS PROFESSIONAL CENTER, LLC

Current Principal Place of Business:

19302 GUNN HWY
ODESSA, FL 33556

New Principal Place of Business:

18936 N DALE MABRY HWY
LUTZ, FL 33548

Current Mailing Address:

19302 GUNN HWY
P O BOX 128
ODESSA, FL 33556

New Mailing Address:

P O BOX 128
ODESSA, FL 33556

FEI Number: 20-5782115 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOWELL, KEVIN E JR
19302 GUNN HWY
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

HOWELL, KEVIN E JR
18936 N DALE MABRY HWY
LUTZ, FL 33548 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: _____ 04/03/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HOWELL, KEVIN E JR
Address: 19302 GUNN HWY
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HOWELL, KEVIN E JR
Address: 18936 N DALE MABRY HWY
City-St-Zip: LUTZ, FL 33548

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: KEVIN E HOWELL JR MMGR 04/03/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date