

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117984

FILED  
Apr 04, 2007  
Secretary of State

**Entity Name:** CESAR R. GAMERO, M.D., LLC

**Current Principal Place of Business:**

9401 SW, SR 200  
BUILDING 2000, SUITE 2004  
OCALA, FL 34481

**New Principal Place of Business:**

**Current Mailing Address:**

9401 SW, SR 200  
BUILDING 2000, SUITE 2004  
OCALA, FL 34481

**New Mailing Address:**

**FEI Number:** 75-3227205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMERO, CESAR R  
9401 SW, SR 200  
BUILDING 2000, SUITE 2004  
OCALA, FL 34481 US

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

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:**

**Title:** MGRM ( ) Delete  
**Name:** GAMERO, CESAR R  
**Address:** 9401 SW, SR 200. BUILDING 2000, SUITE 2004  
**City-St-Zip:** OCALA, FL 34481 US

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** GAMERO, CESAR R  
**Address:** 9401 SW, SR 200. BUILDING 2000, SUITE 2004  
**City-St-Zip:** OCALA, FL 34481 US

I hereby certify that the information supplied with this filing does not qualify for the 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:** CESAR R. GAMERO

MGR

04/04/2007

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