

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 11, 2008 8:00 am
Secretary of State

09-11-2008 90025 019 ***138.75

DOCUMENT # L07000004962



1. Entity Name
GREGORY R. WHITE, MD, LLC

Principal Place of Business
**7510 CAMDEN HARBOUR DR
BRADENTON, FL 34212 US**

Mailing Address
**7510 CAMDEN HARBOUR DR
BRADENTON, FL 34212 US**

2. Principal Place of Business - No P.O. Box #
335 OSPREY WAY LANDING

3. Mailing Address
335 OSPREY WAY LANDING



07232008 Chg-LLC CR2E083 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
LAKE LAND FL

City & State
LAKE LAND FL

4. FEI Number
20-8227076

Applied For
Not Applicable

Zip **33813** Country **U.S.**

Zip **33813** Country **US**

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WHITE, GREGORY R
7510 CAMDEN HARBOUR DR
BRADENTON, FL 34212**

7. Name and Address of New Registered Agent

Name
WHITE, GREGORY R.

Street Address (P.O. Box Number is Not Acceptable)

335 SOPREY WAY LANDING

City **LAKE LAND** **FL** Zip Code **33813**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **GREGORY R. WHITE** **9/17/08**
Signature typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
WHITE, GREGORY R
335 OSPREY LANDING WAY
LAKE LAND, FL 33813** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**335 OSPREY WAY LANDING
LAKE LAND FL 33813**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: **GREGORY R. WHITE** **/ /08 863-698-8643**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #