

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005628

FILED  
Jul 03, 2008  
Secretary of State

Entity Name: FT. MYERS PAIN MANAGEMENT, PLLC

**Current Principal Place of Business:**

13400 PARKER COMMONS BLVD  
BUILDING NO. 8  
FT. MYERS, FL 33912 US

**New Principal Place of Business:**

**Current Mailing Address:**

3618 LANTANA RD  
SUITE 200  
LAKE WORTH, FL 33462 US

**New Mailing Address:**

FEI Number: 20-5725284

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERGER, CHARLES W ESQ.  
2255 GLADES RD  
SUITE 337W  
BOCA RATON, FL US 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: MGR ( ) Delete  
Name: ROGERS, ANTHONY G M.D.  
Address: 3618 LANTANA RD SUITE 200  
City-St-Zip: LAKE WORTH, FL 33462 US

**ADDITIONS/CHANGES:**

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: ANTHONY G. ROGERS

MGR

07/03/2008

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