

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007754

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** ENT ASSOCIATES OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**

8130 ROYAL PALM BLVD  
SUITE 205  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

9311 WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 65-1927065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SABGA, SHAWN P  
9311 WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065 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: SABGA, SHAWN P  
Address: 9311 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete  
Name: YOUNG, ANDREW M  
Address: 9311 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete  
Name: PENCE DO, MELANIE  
Address: 9311 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR ( ) Delete  
Name: GROCH DO, NICHOLAS  
Address: 9311 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** SHAWN SABGA

RA

04/30/2009

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