

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000012913

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: 3310 SOUTHWEST 34TH STREET, L.L.C.

## Current Principal Place of Business:

3310 S.W. 34TH STREET  
OCALA, FL 34474

## New Principal Place of Business:

## Current Mailing Address:

3310 S.W. 34TH STREET  
OCALA, FL 34474

## New Mailing Address:

FEI Number: 01-0896738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GASSMAN, ALAN S  
1245 COURT STREET, SUITE 102  
CLEARWATER, FL 33756 US

## Name and Address of New Registered Agent:

DRESEN, WILLIAM F MD  
3310 SW 34TH STREET  
OCALA, FL 34474 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: WILLIAM F. DRESEN, MD

04/06/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: YULANI, FREDRICK  
Address: 3310 SW 34 ST.  
City-St-Zip: Ocala, FL 34474

Title: MGR ( ) Delete  
Name: STONE, IRA M  
Address: 3310 SW 34 ST.  
City-St-Zip: Ocala, FL 34474

Title: MGR ( ) Delete  
Name: MURTHY, SRNIAGE  
Address: 3310 SW 34 ST  
City-St-Zip: Ocala, FL 34474

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DRESEN, WILLIAM F MD  
Address: 3310 SW 34 ST.  
City-St-Zip: Ocala, FL 34474

Title: MGR (X) Change ( ) Addition  
Name: STONE, IRA M MD  
Address: 3310 SW 34 ST.  
City-St-Zip: Ocala, FL 34474

Title: MGR (X) Change ( ) Addition  
Name: RAI, SWAROOP K MD  
Address: 3310 SW 34 ST  
City-St-Zip: Ocala, FL 34474

Title: MGR ( ) Change (X) Addition  
Name: MITTAL, VIJAY K MD  
Address: 3310 SW 34 ST  
City-St-Zip: Ocala, FL 34474

Title: MGR ( ) Change (X) Addition  
Name: ALONSO, JOSEPH R MD  
Address: 3310 SW 34 ST  
City-St-Zip: Ocala, FL 34474

Title: MGR ( ) Change (X) Addition  
Name: CACODCAR, SUREXA S MD  
Address: 3310 SW 34 ST  
City-St-Zip: Ocala, FL 34474

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: WILLIAM F. DRESEN, MD

MGR

04/06/2009

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