

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000017832

FILED
Mar 10, 2010
Secretary of State

Entity Name: PONTE VEDRA BEACH PLASTIC SURGERY, LLC

Current Principal Place of Business:

209 PONTE VEDRA PARK DRIVE
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

209 PONTE VEDRA PARK DRIVE
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAIRBANKS, RANDAL C
50 NORTH LAURA STREET
SUITE 2500
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

FAIRBANKS, RANDAL C
113 NATURE WALK PARKWAY
SUITE 103
ST. AUGUSTINE, FL 32092 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:

03/10/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BURK, III, ROBERT W MD
Address: 209 PONTE VEDRA PARK DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR
Name: SCIOSCIA, PAUL J MD
Address: 209 PONTE VEDRA PARK DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR
Name: RUMSEY, III, C. CAYCE MD
Address: 209 PONTE VEDRA PARK DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR
Name: SNYDER, BRETT J MD
Address: 209 PONTE VEDRA PARK DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby 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: PAUL J. SCIOSCIA, MD

MGR

03/10/2010

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