

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035150

FILED  
Jan 19, 2009  
Secretary of State

**Entity Name:** MEDI WEIGHT LOSS - ST. PETERSBURG - PHYSICIANS GROUP, P.L.

**Current Principal Place of Business:**

3268 66TH STREET NORTH  
ST PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

3268 66TH STREET NORTH  
ST PETERSBURG, FL 33710

**New Mailing Address:**

2454 MCMULLEN BOOTH ROAD  
SUITE 601  
CLEARWATER, FL 33759

**FEI Number:** 20-8754202

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZBELLA, EDWARD A MD  
3268 66TH STREET NORTH  
ST PETERSBURG, FL 33710 US

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

ZBELLA, EDWARD A MD  
2454 MCMULLEN BOOTH ROAD  
SUITE 601  
CLEARWATER, FL 33759 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: EDWARD ZBELLA

01/19/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: D ( ) Delete  
Name: ZBELLA, EDWARD  
Address: 2454 MCMULLEN BOOTH RD  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: SANCHEZ, MARK  
Address: 2454 MCMULLEN BOOTH RD  
City-St-Zip: CLEARWATER, FL 33759

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ZBELLA, EDWARD  
Address: 2454 MCMULLEN BOOTH RD SUITE 601  
City-St-Zip: CLEARWATER, FL 33759

Title: MGR (X) Change ( ) Addition  
Name: SANCHEZ, MARK  
Address: 2454 MCMULLEN BOOTH RD SUITE 601  
City-St-Zip: CLEARWATER, FL 33759

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: EDWARD ZBELLA

MGR

01/19/2009

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