

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048797

Entity Name: 7400 SOUTH TRAIL, PLLC

FILED  
Mar 18, 2009  
Secretary of State

**Current Principal Place of Business:**

1750 SOUTH OSPREY AVE.  
SARASOTA, FL 34239

**New Principal Place of Business:**

7400 S. TAMIAMI TRAIL  
SARASOTA, FL 34231

**Current Mailing Address:**

1750 SOUTH OSPREY AVE.  
SARASOTA, FL 34239

**New Mailing Address:**

7400 S. TAMIAMI TRAIL  
SARASOTA, FL 34231

FEI Number: 26-0264914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILSON, MICHAEL J  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 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: MILAM, CATHY P M.D.  
Address: 1750 SOUTH OSPREY AVE.  
City-St-Zip: SARASOTA, FL 34239

Title: MGR ( ) Delete  
Name: BOGART, MEGAN M M.D.  
Address: 1750 SOUTH OSPREY AVE.  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MILAM, CATHY P M.D.  
Address: 7400 S. TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34231

Title: MGR (X) Change ( ) Addition  
Name: BOGART, MEGAN M M.D.  
Address: 7400 S. TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34231

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: CATHY P. MILAM, MD

MGR

03/18/2009

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