

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053399

Entity Name: THE MIKEY CENTER, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

5300 PAYLOR LANE
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

5300 PAYLOR LANE
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 26-1131314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEVENS, M D
5300 PAYLOR LAND
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

STEVENS, M.D.
5300 PAYLOR LANE
SARASOTA, FL 34240 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: M.D. STEVENS

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STEVENS, M D
Address: 5300 PAYLOR LANE
City-St-Zip: SARASOTA, FL 34240

Title: MGRM () Delete
Name: KING, STEVEN
Address: 5200 PAYLOR LANE
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STEVENS, M.D.
Address: 5300 PAYLOR LANE
City-St-Zip: SARASOTA, FL 34240

Title: MGRM (X) Change () Addition
Name: KING, STEVEN
Address: 5300 PAYLOR LANE
City-St-Zip: SARASOTA, FL 34240

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: M.D. STEVENS

MGRM

04/29/2008

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