2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# L07000069318

Entity Name: NEUROLOGY HOLDINGS, LLC

Current Principal Place of Business:

3849 OAKWATER CIR
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

3849 OAKWATER CIR
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-3573345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KLAFTER, STARI
3489 OAKWATER CIR
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

KLAFTER, SHARI S
2629 UPPER PARK ROAD
ORLANDO, FL 32814 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: SHARI S. KLAFTER 05/01/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KLAFTER, SHARI
Address: 3849 OAKWATER CIR
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KLAFTER, SHARI
Address: 2629 UPPER PARK ROAD
City-St-Zip: ORLANDO, FL 32814

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: SHARI S. KLAFTER MGR 05/01/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date