

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000080373

FILED
Sep 03, 2009
Secretary of State

Entity Name: OUR HEART AND VASCULAR CENTER, LLC

Current Principal Place of Business:

1510 N. JASMINE AVENUE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

1510 N. JASMINE AVENUE
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 26-0665339 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:

Name and Address of New Registered Agent:

CHALAVARYA, GOPAL
1510 N. JASMINE AVE
TARPON SPRINGS, FL 34689 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHALAVARYA, GOPAL
Address: 1510 N.JASMINE AVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GOPAL CHALAVARYA

MGRM

09/03/2009

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