

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089041

FILED
Apr 26, 2010
Secretary of State

Entity Name: GREER HEALTHCARE & ASSOCIATES, LLC

Current Principal Place of Business:

9671 GLADIOLUS DRIVE
SUITE 109
FT. MYERS, FL 33908

New Principal Place of Business:

8140 COLLEGE PARKWAY
SUITE 101
FT. MYERS, FL 33919

Current Mailing Address:

13300-56 S. CLEVELAND AVENUE
#629
FT. MYERS, FL 33907

New Mailing Address:

FEI Number: 26-0811419 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KYLE, KEVIN A
1380 ROYAL PALM SQUARE BLVD.
FT. MYERS, FL 33919 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
Name: GREER, SHANNON S D.O.
Address: 13300-56 S. CLEVELAND AVENUE #629
City-St-Zip: FT. MYERS, FL 33907

I hereby 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: SHANNON S. GREER, D.O. MGR 04/26/2010

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