

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000110707

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** RADLEY L. GRIFFIN, M.D., P.L.

**Current Principal Place of Business:**

602 S AUDUBON STREET  
SUITE C  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

602 S AUDUBON STREET  
SUITE C  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 42-1745305

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH AEBEL, ERIN ESQ  
SHUMAKER LOOP & KENDRICK LLP  
101 EAST KENNEDY BLVD. SUITE 2800  
TAMPA, FL 33602 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: DR  
Name: GRIFFIN, RADLEY L M.D.  
Address: 602 S. AUDUBON AVE., SUITE C  
City-St-Zip: TAMPA, FL 33609

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: RADLEY L GRIFFIN, MD

DR

03/15/2011

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