

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115369

FILED
Apr 28, 2011
Secretary of State

Entity Name: SEBASTIAN DERMATOLOGY, L.L.C.

Current Principal Place of Business:

140 S.W. CHAMBER COURT, SUITE 200
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

140 S.W. CHAMBER COURT
SUITE 200
PORT ST. LUCIE, FL 34986

Current Mailing Address:

140 S.W. CHAMBER COURT, SUITE 200
PORT ST. LUCIE, FL 34986

New Mailing Address:

140 S.W. CHAMBER COURT
SUITE 200
PORT ST. LUCIE, FL 34986

FEI Number: 26-1655123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLHASSEE, FL 32301 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: IOANNIDES, TIM M.D.
Address: 140 S.W. CHAMBER COURT, SUITE 200
City-St-Zip: PORT ST. LUCIE, FL 34986

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: TIM IOANNIDES

MGR

04/28/2011

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