## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000014901

Address:

4028 ESTANCIA WAY

Entity Name: DERMATOLOGY FIRST, LLC

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4028 ESTANCIA WAY 1936 DAIRY ROAD

MELBOURNE, FL 32934 US W MELBOURNE, FL 32904 US

Current Mailing Address: New Mailing Address:

4028 ESTANCIA WAY 1936 DAIRY ROAD

MELBOURNE, FL 32934 US W MELBOURNE, FL 32904 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

KANJ-JAMALEDDINE, LINA F 4028 ESTANCIA WAY KANJ-JAMALEDDINE, LINA F 1936 DAIRY ROAD

MELBOURNE, FL 32934 US W MELBOURNE, FL 32904 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: 04/14/2009

Electronic Signature of Registered Agent Date

Address:

1936 DAIRY ROAD

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: KANJ-JAMALEDDINE, LINA F Address: 4028 ESTANCIA WAY Address: 1936 DAIRY ROAD

City-St-Zip: MELBOURNE, FL 32934 US City-St-Zip: W MELBOURNE, FL 32904 US

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: JAMALEDDINE, NAZIH Name: JAMALEDDINE, NAZIH

City-St-Zip: MELBOURNE, FL 32934 US City-St-Zip: W MELBOURNE, FL 32904 US

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: LINA KANJ-JAMALEDDINE PRES 04/14/2009