

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018407

FILED
Apr 12, 2010
Secretary of State

Entity Name: GAYNAIR FAMILY MEDICINE, LLC

Current Principal Place of Business:

4900 WEST OAKLAND PARK BLVD
SUITE 202
LAUDERDALE LAKES, FL 33313

New Principal Place of Business:

Current Mailing Address:

PO BOX 15668
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 35-2326507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LEGAIR LAW FIRM PA
1601 N PALM AVENUE
SUITE 304A
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

SURRY, KENNETH D MANAGER
4900 W OAKLAND PK BLVD
SUITE 202
LAUDERDALE LAKES, FL 33313 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: KAREN GAYNAIR

04/12/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: GAYNAIR, KAREN A
Address: 4900 WEST OAKLAND PARK BLVD, STE 202
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: MGRM
Name: SURRY, KENNETH
Address: 4900 W OAKLAND PK BLVD, STE 202
City-St-Zip: LAUDERDALE LAKES, FL 33313

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: KAREN GAYNAIR

MD

04/12/2010

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