

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000024736

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** CONSTANCE B. PURSER, M.D., P.L.

**Current Principal Place of Business:**

1780 FLOYD STREET  
SARASOTA, FL 34239

**New Principal Place of Business:**

8936 77TH TERRACE EAST, SUITE 102  
LAKEWOOD RANCH, FL 34202

**Current Mailing Address:**

1780 FLOYD STREET  
SARASOTA, FL 34239

**New Mailing Address:**

8936 77TH TERRACE EAST, SUITE 102  
LAKEWOOD RANCH, FL 34202

FEI Number: 41-2271731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PURSER, CONSTANCE B  
8936 77TH TERRACE EAST, SUITE 102  
LAKEWOOD RANCH, FL 34202 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: MGRM  
Name: PURSER, CONSTANCE B M.D.  
Address: 8936 77TH TERRACE EAST, SUITE 102  
City-St-Zip: LAKEWOOD RANCH, FL 34202 US

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: CONSTANCE B PURSER

MGRM

02/16/2010

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