

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000058849

**FILED**  
**May 02, 2010**  
**Secretary of State**

**Entity Name:** SARASOTA PHARMACY PROPERTIES, LLC

**Current Principal Place of Business:**

6804 ERICA LANE  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

6804 ERICA LANE  
SARASOTA, FL 34241

**New Mailing Address:**

**FEI Number:** 26-2816252      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MCGINNESS, W. LEE  
1800 SECOND STREET, SUITE 971  
SARASOTA, FL 34236 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** PIREAUX, FREDERICK G JR  
**Address:** 6804 ERICA LN  
**City-St-Zip:** SARASOTA, FL 34241 US

**Title:** MGRM  
**Name:** PIREAUX, KELLY D  
**Address:** 6804 ERICA LN  
**City-St-Zip:** SARASOTA, FL 34241 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: KELLY D PIREAUX

MGRM

05/02/2010

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