2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000060318

Entity Name: PARADISE PEDIATRICS, PL

FILED Mar 18, 2009 Secretary of State

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

2940 S. TAMIAMI TRAIL 3400 BEE RIDGE RD. SARASOTA, FL 34239

120

SARASOTA, FL 34239

Current Mailing Address: New Mailing Address:

4411 BEE RIDGE RD. 2940 S. TAMIAMI TRAIL SARASOTA, FL 34239 419 SARASOTA, FL 34233

FEI Number: 26-2847307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JUDD, ULRICH, SCARLETT, SUMMONTE & DEAN 2940 S. TAMIAMI TRAIL SARASOTA, FL 34239 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:

City-St-Zip:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

() Delete SOUTHERLAND, SUZANNE M Name: Address: 2940 S. TAMIAMI TRAIL City-St-Zip: SARASOTA, FL 34239

Title: () Delete Name: Address:

Title: (X) Change () Addition SOUTHERLAND, SUZANNE M Name:

Address: 3400 BEE RIDGE RD., #120 City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES:

Title: () Change (X) Addition Name: MURREN-BOEZEM, JOANNE J Address: 3400 BEE RIDGE RD. #120 City-St-Zip: SARASOTA, FL 34239

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: SUZANNE SOUTHERLAND 03/18/2009