

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000071359

FILED
Apr 25, 2009
Secretary of State

Entity Name: EAR, NOSE & THROAT SPECIALISTS OF ST. CLOUD, LLC

Current Principal Place of Business:

4691 OLD CANOE CREEK
ST. CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

2764 MUSCATELLO STREET
ORLANDO, FL 32837 US

New Mailing Address:

4691 OLD CANOE CREEK
ST. CLOUD, FL 34769 US

FEI Number: 26-3041997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUQUE, CINDY ESQ.
13574 VILLAGE PARK DRIVE
SUITE 200
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

TRINH, THUONG D.O.
4691 OLD CANOE CREEK
ST. CLOUD, FL 34769 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: THUONG TRINH

04/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TRINH, THUONG
Address: 2764 MUSCATELLO STREET
City-St-Zip: ORLANDO, FL 32837 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TRINH, THUONG
Address: 10107 WITTENBERG WAY
City-St-Zip: ORLANDO, FL 32832 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: THUONG TRINH

DR.

04/25/2009

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