

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073886

FILED
Jan 11, 2012
Secretary of State

Entity Name: VINAYAK V. PURANDARE, M.D., P.L.

Current Principal Place of Business:

401 LAKEBRIDGE PLAZA DRIVE
ORMOND BEACH, FL 32174

New Principal Place of Business:

305 MEMORIAL MEDICAL PARKWAY
SUITE 507
DAYTONA BEACH, FL 32117

Current Mailing Address:

401 LAKEBRIDGE PLAZA DRIVE
ORMOND BEACH, FL 32174

New Mailing Address:

305 MEMORIAL MEDICAL PARKWAY
SUITE 507
DAYTONA BEACH, FL 32117

FEI Number: 26-3073790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PURANDARE, VINAYAK V DR.
401 LAKEBRIDGE PLAZA DRIVE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

PURANDARE, VINAYAK V DR.
305 MEMORIAL MEDICAL PARKWAY
SUITE 507
DAYTONA BEACH, FL 32117 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: VINAYAK V. PURANDARE, M.D.

01/11/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: OWNE
Name: PURANDARE, VINAYAK V M.D.
Address: 305 MEMORIAL MEDICAL PARKWAY, SUITE 507
City-St-Zip: DAYTONA BEACH, FL 32117 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: VINAYAK V. PURANDARE, M.D.

OWNE

01/11/2012

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