

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089416

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: BAY NURSE, PL

**Current Principal Place of Business:**

4905 E 98TH AVENUE  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

4905 E 98TH AVENUE  
TAMPA, FL 33617

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

RODRIGUEZ, JESSE H  
4905 E 98TH AVENUE  
TAMPA, FL 33617 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 ( ) Delete  
Name: RODRIGUEZ, JESSE H  
Address: 4905 E 98TH AVENUE  
City-St-Zip: TAMPA, FL 33617

**ADDITIONS/CHANGES:**

Title: COO (X) Change ( ) Addition  
Name: RODRIGUEZ, JESSE H  
Address: 4905 E 98TH AVENUE  
City-St-Zip: TAMPA, FL 33617

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: JESSE RODRIGUEZ

COO

01/06/2009

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