2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000106762

Entity Name: CHAPPEL FAMILY PRACTICE LLC

FILED Apr 14, 2009 Secretary of State

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

222 BROADWAY 222 BROADWAY AVE SUITE 301 SUITE 301

KISSIMMEE, FL 34741 KISSIMMEE, FL 34741

Current Mailing Address: New Mailing Address:

222 BROADWAY 222 BROADWAY AVE SUITE 301 SUITE 301 KISSIMMEE, FL 34741 KISSIMMEE, FL 34741

FEI Number: 26-3724249 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:

CHAPPEL, CHRISTOPHER M MD

445 W OAK ST

222 BROADWAY AVE

SUITE 241

KISSIMMEE, FL 34741 US SUITE 211
KISSIMMEE, FL 34741 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: CHRISTOPHER M. CHAPPEL 04/14/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CHAPPEL, CHRISTOPHER M MD
 Name:

 Address:
 4900 MANOR HOUSE LANE
 Address:

 City-St-Zip:
 ST CLOUD, FL 34772
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CANNON, JEFFREY G
 Name:

 Address:
 3128 KENTSHIRE BLVD
 Address:

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:

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: CHRISTOPHER M. CHAPPEL MGRM 04/14/2009