

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109674

Entity Name: IPS OF FT. MYERS, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

7431 GLADIOLUS DR
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

201 MONTGOMERY AVE
SARASOTA, FL 34243

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOBACK, CARL R MD
201 MONTGOMERY AVE
SARASOTA, FL 34243 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: MGR () Delete
Name: NOBACK, CARL R MD
Address: 201 MONTGOMERY AVE
City-St-Zip: SARASOTA, FL 34243

Title: MGR (X) Delete
Name: HORWITZ, MICHAEL H DPM
Address: 8637 DELMAR BLVD.
City-St-Zip: ST. LOUIS, MO 63124 19

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CARL R NOBACK

MBRM

04/22/2009

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