

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000110056

FILED
Jan 06, 2011
Secretary of State

Entity Name: MAURICE S. SCHNEIDER, M.D., P.L.

Current Principal Place of Business:

5208 OLD GALLOWS WAY
NAPLES, FL 34105

New Principal Place of Business:

6101 PINE RIDGE RD
304
NAPLES, FL 34119

Current Mailing Address:

5208 OLD GALLOWS WAY
NAPLES, FL 34105

New Mailing Address:

FEI Number: 26-3803584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINCK, LINDA R ESQ.
% PORTER, WRIGHT, MORRIS & ARTHUR LLP
5801 PELICAN BAY BLVD., SUITE 300
NAPLES, FL 341082709 US

Name and Address of New Registered Agent:

SCHNEIDER, MAURICE S MD
5208 OLD GALLOWS WAY
NAPLES, FL 34105 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: MAURICE STEPHEN SCHNEIDER

01/06/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES
Name: SCHNEIDER, MAURICE S MD
Address: 5208 OLD GALLOWS WAY
City-St-Zip: NAPLES, FL 34105

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: MAURICE STEPHEN SCHNEIDER

PRES

01/06/2011

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