

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000047510

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** ANASTASIA E. FARMAKIS, D.O., P.L.L.C.

**Current Principal Place of Business:**

544 MERIDALE AVE  
ORLANDO, FL 32803

**New Principal Place of Business:**

2875 DELANEY AVENUE  
ORLANDO, FL 32806

**Current Mailing Address:**

544 MERIDALE AVE  
ORLANDO, FL 32803

**New Mailing Address:**

2875 DELANEY AVENUE  
ORLANDO, FL 32806

FEI Number: 27-0329241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FARMAKIS, ANASTASIA E  
544 MERIDALE AVE  
ORLANDO, FL 32803 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  
Name: FARMAKIS, ANASTASIA E  
Address: 2875 DELANEY AVENUE  
City-St-Zip: ORLANDO, FL 32806

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: ANASTASIA E FARMAKIS, DO

PRES

01/18/2010

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