2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# L09000056067

Entity Name: OAKS FAMILY MEDICAL, LLC

Current Principal Place of Business:

8620 SOUTH TAMIAMI TRAIL
N-P
SARASOTA, FL 34238

New Principal Place of Business:

Current Mailing Address:

8620 SOUTH TAMIAMI TRAIL
N-P
SARASOTA, FL 34238

New Mailing Address:

FEI Number: 27-0339490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIANNINI, ALEX A DDS
8620 SOUTH TAMIAMI TRAIL
N-P
SARASOTA, FL 34238 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: GIANNINI, ALEX A DDS
Address: 8620 SOUTH TAMIAMI TRAIL, SUITE N-P
City-St-Zip: SARASOTA, FL 34238

Title: MGR
Name: GIANNINI, MARIA PIA
Address: 8620 SOUTH TAMIAMI TRAIL, SUITE N-P
City-St-Zip: SARASOTA, FL 34238

Title: MGR
Name: GIANNINI, FRANCESCA
Address: 8620 SOUTH TAMIAMI TRAIL, SUITE N-P
City-St-Zip: SARASOTA, FL 34238

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 Statues.

SIGNATURE: ALEX A. GIANNINI MGRM 02/16/2011

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