

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000064833

FILED
May 03, 2010
Secretary of State

Entity Name: THE FELDMAN PHYSICIAN GROUP, PL

Current Principal Place of Business:

1511 SW 1ST AVENUE
OCALA, FL 34474

New Principal Place of Business:

1511 SW 1ST AVENUE
OCALA, FL 34474 US

Current Mailing Address:

1511 SW 1ST AVENUE
OCALA, FL 34474

New Mailing Address:

1511 SW 1ST AVENUE
OCALA, FL 34474 US

FEI Number: 27-0483483 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORTES, JOSE H JR
4 S.E. BROADWAY
OCALA, FL 34471 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
Name: FELDMAN, ROBERT L M.D.
Address: 1511 SW 1ST AVENUE
City-St-Zip: OCALA, FL 34474 US

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: ROBERT L. FELDMAN, M.D.

MGR

05/03/2010

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