

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000074996

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** ALL PARTNERS NETWORK, PLLC

**Current Principal Place of Business:**

2379 ISLAND CREEK TRAIL  
PALM CITY, FL 34990

**New Principal Place of Business:**

901 SW MARTIN DOWNS BLVD.  
SUITE 300  
PALM CITY, FL 34990

**Current Mailing Address:**

2379 ISLAND CREEK TRAIL  
PALM CITY, FL 34990

**New Mailing Address:**

901 SW MARTIN DOWNS BLVD.  
SUITE 300  
PALM CITY, FL 34990

**FEI Number:** 27-0679039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SLOBASKY, MICHAEL S  
2379 ISLAND CREEK TRAIL  
PALM CITY, FL 34990 US

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

SLOBASKY, MICHAEL S  
901 SW MARTIN DOWNS BLVD.  
SUITE 300  
PALM CITY, FL 34990 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: MICHAEL SLOBASKY DO

01/24/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MICHAEL S. SLOBASKY, D.O., P.A.  
Address: 901 SW MARTIN DOWNS BLVD. SUITE 300  
City-St-Zip: PALM CITY, FL 34990

Title: MGRM  
Name: ALLAN VRABLE, D.O., P.A.  
Address: 901 SW MARTIN DOWNS BLVD. SUITE 300  
City-St-Zip: PALM CITY, FL 34990

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: MICHAEL SLOBASKY DO

MGRM

01/24/2012

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