2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

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Entity Name: NEUROLOGY OFFICES OF SOUTH FLORIDA, PLLC

Current Principal Place of Business:

9970 CENTRAL PARK BLVD., STE 207
BOCA RATON, FL 33428 US

New Principal Place of Business:

Current Mailing Address:

9970 CENTRAL PARK BLVD., STE 207
BOCA RATON, FL 33428 US

New Mailing Address:

FEI Number: 27-0843687 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COSTELL, BRIAN A MD
12385 NW 81ST ST.
PARKLAND, FL 33076 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: CEO
Name: COSTELL, BRIAN A MD
Address: 12385 NW 81ST ST.
City-St-Zip: PARKLAND, FL 33076 US

Title: MGR
Name: NESIC, MICHELE L
Address: 9970 CENTRAL PARK BLVD, SUITE 207
City-St-Zip: BOCA RATON, FL 33428

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: MICHELE NESIC MGR 04/30/2012

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