

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000088088

**FILED**  
**Jan 27, 2010**  
**Secretary of State**

**Entity Name:** OCALA PROFESSIONAL OFFICE, LLC

**Current Principal Place of Business:**

2628 SW 87TH WAY  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

7545 W UNIVERSITY AVE  
GAINESVILLE, FL 32607 US

**Current Mailing Address:**

2628 SW 87TH WAY  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

7545 W UNITVERSITY AVE  
GAINESVILLE, FL 32607 US

**FEI Number:** 27-0927017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

R WILLIAM FUTCH, PA  
610 SE 17TH STREET  
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:** LESLIE, ROGER W  
**Address:** PO BOX 8000  
**City-St-Zip:** PARK CITY, UT 84060 US

**Title:** MGR  
**Name:** JOYNER, MILLARD  
**Address:** 7545 W UNIVERSITY AVE  
**City-St-Zip:** GAINESVILLE, FL 32607

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:** ROGER W LESLIE

PRES

01/27/2010

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