

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000100829

FILED
Jun 14, 2011
Secretary of State

Entity Name: GLASER FAMILY MEDICAL CENTER, PLLC

Current Principal Place of Business:

1017-1019 PROFESSIONAL PARK DR.
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

1017-1019 PROFESSIONAL PARK DR.
BRANDON, FL 33511 US

New Mailing Address:

FEI Number: 27-1140082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASER, HERMANDA
1017-1019 PROFESSIONAL PARK DR
BRANDON, FL 33511 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: HERMANDA GLASER, MD, PA

Address: 1017-1019 PROFESSIONAL PARK DR

City-St-Zip: BRANDON, FL 33511 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: HERMANDA GLASER

MGRM

06/14/2011

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