

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000054804

**FILED  
Feb 11, 2011  
Secretary of State**

**Entity Name:** SANJEEV BHATTA, M.D., PLLC

**Current Principal Place of Business:**

835 OAKLEY SEAVER DRIVE  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

835 OAKLEY SEAVER DRIVE  
CLERMONT, FL 34711 US

**New Mailing Address:**

FEI Number: 27-2645432

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BHATTA, SANJEEV  
835 OAKLEY SEAVER DRIVE  
CLERMONT, FL 34711 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: BHATTA, SANJEEV M.D.  
Address: 835 OAKLEY SEAVER DRIVE  
City-St-Zip: CLERMONT, FL 34711 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: SANJEEV BHATTA, M.D.

MGRM

02/11/2011

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