

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000110549

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** DEANGELIS DIAMOND HEALTHCARE GROUP, LLC

**Current Principal Place of Business:**

6635 WILLOW PARK DRIVE  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

6635 WILLOW PARK DRIVE  
NAPLES, FL 34109 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

BOATMAN, JAMES A JR.  
1415 PANTHER LANE  
SUITE 340  
NAPLES, FL 34109 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:** DEANGELIS DIAMOND CONSTRUCTION, INC.  
**Address:** 6635 WILLOW PARK DRIVE  
**City-St-Zip:** NAPLES, FL 34109 US

**Title:** MGR  
**Name:** MORGAN, REGGIE  
**Address:** 27181 DRIFTWOOD DRIVE  
**City-St-Zip:** BONITA SPRINGS, FL 34135 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: REGGIE MORGAN

MGR

04/14/2011

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