

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000031119

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** THE SPECIALISTS AT CITY CENTRE, LLC

**Current Principal Place of Business:**

222 BROADWAY STE 202  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

222 BROADWAY SUITE 202  
KISSIMMEE, FL 34741 US

**Current Mailing Address:**

222 BROADWAY STE 202  
KISSIMMEE, FL 34741

**New Mailing Address:**

222 BROADWAY SUITE 302  
KISSIMMEE, FL 34741 US

**FEI Number:** 27-5082401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CANNON, JEFFREY  
222 BROADWAY STE 202  
KISSIMMEE, FL 34741 US

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

CANNON, JEFFREY  
222 BROADWAY SUITE 302  
KISSIMMEE, FL 34741 US

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: JEFFREY G. CANNON

04/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CANNON, JEFFREY  
Address: 3013 SEIGNEURY DR.  
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM  
Name: CHAPPEL, CHRIS  
Address: 4900 MANOR HOUSE LN  
City-St-Zip: ST CLOUD, FL 34772

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: CHRISTOPHER M. CHAPPEL

MGRM

04/16/2012

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