

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000045717

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** 53RD STREET MEDICAL GROUP, LLC

**Current Principal Place of Business:**

2331 NORTHWEST 53RD STREET  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

2331 NORTHWEST 53RD STREET  
FORT LAUDERDALE, FL 33308

**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:**

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

WHITE, JOHN II ESQ  
NASON, YEAGER, GERSON, WHITE & LIOCE PA  
1645 PALM BEACH LAKES BLVD., STE. 1200  
WEST PALM BEACH, FL 33401 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DORAN, TIMOTHY  
Address: 3185 BOUTWELL ROAD  
City-St-Zip: LAKE WORTH, FL 33461

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: TIMOTHY DORAN

MGR

04/27/2012

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