

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000071242

FILED
Apr 15, 2012
Secretary of State

Entity Name: SHARON M. PARKINSON PSY. D, PL

Current Principal Place of Business:

24850 BURNT PINE DRIVE
SUITE 2
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

24850 BURNT PINE DRIVE
SUITE 2
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 45-2577060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOODS, WEIDENMILLER & MICHETTI, PL
5150 TAMiami TRAIL N
SUITE 603
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

PARKINSON, SHARON M
2849 COCO LAKES COURT
NAPLES, FL 34105 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: SHARON M PARKINSON

04/15/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SHARON, PARKINSON M
Address: 24850 BURNT PINE DRIVE, SUITE 2
City-St-Zip: BONITA SPRINGS, FL 34134

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: SHARON M PARKINSON

DR

04/15/2012

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