

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104789

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA RESEARCH NETWORK, LLC

**Current Principal Place of Business:**

10057 LAUREL ROAD  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

10057 LAUREL ROAD  
DAVIE, FL 33328

**New Mailing Address:**

**FEI Number:** 90-0775367

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSENBERG, ALAN S ESQ  
8211 W BROWARD BLVD STE PH4  
FT LAUDERDALE, FL 33324 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:** GADDY, KAREN L CCRA  
**Address:** 10057 LAUREL ROAD  
**City-St-Zip:** DAVIE, FL 33328

**Title:** MGRM  
**Name:** TODD J. KAZDAN DO PA  
**Address:** 6099 STIRLING ROAD, SUITE 220  
**City-St-Zip:** DAVIE, FL 33314

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: KAREN L. GADDY

MGRM

04/19/2012

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