

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000944

**FILED**  
**Apr 20, 2009**  
**Secretary of State**

**Entity Name:** CYPRESS LAKE PROFESSIONAL CENTER, L.C.

**Current Principal Place of Business:**

11340 LONGWATER CHASE CT.  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

11340 LONGWATER CHASE CT.  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 65-0860103

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURKARD, STEPHAN A  
11340 LONGWATER CHASE CT.  
FORT MYERS, FL 33907 US

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

BURKARD, STEPHAN A  
11340 LONGWATER CHASE CT.  
FORT MYERS, FL 33908 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:**

04/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** FLORIDA INVESTMENT AND MANAGEMENT CONSULTI  
**Address:** 11340 LONGWATER CHASE CT.  
**City-St-Zip:** FORT MYERS, FL 33907

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** FLORIDA INVESTMENT AND MANAGEMENT CONSULTI  
**Address:** 11340 LONGWATER CHASE CT.  
**City-St-Zip:** FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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:** STEPHAN A. BURKARD

MGRM

04/20/2009

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