

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000003173

**FILED
Jan 23, 2009
Secretary of State**

Entity Name: TAMPA BAY NEPHROLOGY ASSOCIATES, P.L.

Current Principal Place of Business:

4705 N. ARMENIA, SUITE A
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

4705 N. ARMENIA, SUITE A
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-3546330 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RAMIREZ, GERMAN M.D.
4705 N. ARMENIA AVENUE
SUITE A
TAMPA, FL 33603 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: MGR () Delete
Name: RAMIREZ, GERMAN M.D.
Address: 4705 N. ARMENIA, SUITE A
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GERMAN RAMIREZ, MD

MGR

01/23/2009

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