

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004664

FILED
Mar 17, 2009
Secretary of State

Entity Name: SOCC, P.L.

Current Principal Place of Business:

11364 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

New Principal Place of Business:

4170 TOWN CENTER BLVD
SUITE 100
ORLANDO, FL 32837

Current Mailing Address:

11364 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837

New Mailing Address:

4170 TOWN CENTER BLVD
SUITE 100
ORLANDO, FL 32837

FEI Number: 59-3592808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEBOVSKY, DR. JEFFREY N
11364 SOUTH ORANGE BLOSSOM TRAIL
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

SHEBOVSKY, DR. JEFFREY N
4170 TOWN CENTER BLVD
ORLANDO, FL 32837 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: DR. JEFFREY SHEBOVSKY

03/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHEBOVSKY, DR. JEFFREY N
Address: 11364 SOUTH ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHEBOVSKY, DR. JEFFREY N
Address: 4170 TOWN CENTER BLVD
City-St-Zip: ORLANDO, FL 32837

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: DR. JEFFREY SHEBOVSKY

MGRM

03/17/2009

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