

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003209

FILED
Apr 27, 2009
Secretary of State

Entity Name: NORTHSIDE MEDICAL PLAZA, LLC

Current Principal Place of Business:

475 CENTRAL AVE
305
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

475 CENTRAL AVE
305
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 32-0016550 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SANDERS LAW GROUP, PA
2958 1ST AVENUE N.
ST. PETERSBURG, FL 33713 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 () Delete
Name: MARSTON, PATRICK
Address: 475 CENTRAL AVE
City-St-Zip: ST. PETERSBURG, FL 33701

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: PATRICK MARSTON

MGR

04/27/2009

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