

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000004141

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** CAPE CORAL MEDICAL OFFICES, LLC

**Current Principal Place of Business:**

3621 VININGS SLOPE, S.E.  
SUITE 4420  
ATLANTA, GA 30339

**New Principal Place of Business:**

**Current Mailing Address:**

3621 VININGS SLOPE, S.E.  
SUITE 4420  
ATLANTA, GA 30339

**New Mailing Address:**

**FEI Number:** 27-3126668

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLAUCH, GLEN  
801 LAUREL OAK DR.  
SUITE 630  
NAPLES, FL 34108 US

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

BLAUCH, GLEN T JR.  
14710 TAMiami TRAIL N.  
SUITE 101  
NAPLES, FL 34110 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: GLEN T. BLAUCH, JR.

03/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MIDDELTHON, D. MATTHEW  
Address: 3621 VININGS SLOPE, S.E., SUITE 4420  
City-St-Zip: ATLANTA, GA 30339

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: D. MATTHEW MIDDELTHON

MGR

03/21/2011

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