

2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000000324

FILED
Apr 27, 2004
Secretary of State

Entity Name: PROVIDENCE OF CENTRAL FLORIDA, LTD.

Current Principal Place of Business:

400 WEST MORSE BLVD., SUITE 101
WINTER PARK, FL 32789

New Principal Place of Business:

1788 W. FAIRBANKS AVENUE
WINTER PARK, FL 32789

Current Mailing Address:

400 WEST MORSE BLVD., SUITE 101
WINTER PARK, FL 32789

New Mailing Address:

1788 W. FAIRBANKS AVENUE
WINTER PARK, FL 32789

FEI Number: 59-3430696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORAN, THOMAS P ESQ.
111 N. ORANGE AVE., SUITE 1200
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

FAKIH, FAISAL A MD
1788 W. FAIRBANKS AVENUE
WINTER PARK, FL 32789 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: FAISAL A. FAKIH, MD

04/27/2004

Electronic Signature of Registered Agent

Date

Capital Contributions as Shown on record: 1,400.00

Amount of Capital Contributions in Florida to date: 1,400.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #:

Name: PCF OF CENTRAL FLORIDA, INC.

Address: 400 WEST MORSE BLVD., SUITE 101

City-St-Zip: WINTER PARK, FL 32789

Address: 1788 W. FAIRBANKS AVENUE

City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: FAISAL A. FAKIH

PRES

04/27/2004

Electronic Signature of Signing General Partner

Date