

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000013376

FILED
Jan 17, 2003
Secretary of State

Entity Name: MONUMENT-9A MEDICAL II, L.L.C.

Current Principal Place of Business:

1201 MONUMENT ROAD
SUITE #200
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

1201 MONUMENT ROAD
SUITE #200
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARDSLEY, DALE A ESQ.
4595 LEXINGTON AVE. SUITE 100
JACKSONVILLE, FL 322102058

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/MEMBERS:

Title: MGR () Delete
Name: ONDREJICKA, JOHN
Address: 1201 MONUMENT ROAD
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGR () Delete
Name: SOLANO, MOISES
Address: 1201 MONUMENT ROAD
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES:

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

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

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 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: JOHN ONDREJICKA MGR 01/17/2003

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