

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032199

FILED
Jul 02, 2004
Secretary of State

Entity Name: SPECIALTY MEDICAL SYSTEMS OF FLORIDA, LLC

Current Principal Place of Business:

5425 BEAUMONT CENTER BLVD
SUITE 914
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

5425 BEAUMONT CENTER BLVD
SUITE 914
TAMPA, FL 33634

New Mailing Address:

FEI Number: 13-4224247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YUROCKO, MICHAEL A
4515 CHEVAL BLVD.
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

ARMENTROUT, GENE
5425 BEAUMONT CENTER BLVD
SUITE 914
TAMPA, FL 33634 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: GENE ARMENTROUT

07/02/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: YUROCKO, MICHAEL A
Address: 4515 CHEVAL BLVD
City-St-Zip: LUTZ, FL 33558

Title: MGRM () Delete
Name: ARMENTROUT, MICHAEL J
Address: 3808 W. 153RD ST
City-St-Zip: LEAWOOD, KS 66224

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: YUROCKO, MICHAEL A
Address: 5425 BEAUMONT CENTER BLVD. SUITE 914
City-St-Zip: TAMPA, FL 33634

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: MICHAEL ARMENTROUT

MR

07/02/2004

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