

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 11, 2007  
Secretary of State**

DOCUMENT# L05000086032

Entity Name: MIDWIFERY ASSOCIATE LLC

**Current Principal Place of Business:**

4101 N.W. 4TH STREET  
SUITE 309  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

4101 N.W. 4TH STREET  
SUITE 306  
PLANTATION, FL 33317 US

**Current Mailing Address:**

6605 N.W. 50TH STREET  
LAUDERHILL, FL 33319

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CAMPBELL, THELMA M C.N.M.  
4101 N.W. 4TH STREET  
SUITE 309  
PLANTATION, FL 33317 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: CAMPBELL, THELMA M C.N.M.  
Address: 4101 N.W. 4TH STREET  
City-St-Zip: PLANTATION, FL 33317 US

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: THELMA CAMPBELL

CNM

05/11/2007

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