


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000011532 1. Entity Name S. GOLDMAN, M.D./C. PITARYS, M.D. L.L.C.	
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Principal Place of Business 14100 FIVAY ROAD, SUITE 110 HUDSON, FL 34668	Mailing Address 14100 FIVAY ROAD, SUITE 110 HUDSON, FL 34668
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DO NOT WRITE IN THIS SPACE



04252005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 13-4242340	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent GOLDMAN, STEPHEN A M.D. 14100 FIVAY ROAD, SUITE 110 HUDSON, FL 34668
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GOLDMAN, STEPHEN A M.D. 5723 HIGH STREET NEW PORT RICHEY, FL 34652
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PITARYS, CHRISTOS J II, MD 5723 HIGH STREET NEW PORT RICHEY, FL 34652
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05/02/05-80085-024 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	4-27-05	Date	Daytime Phone #
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