

2002 UNIFORM BUSINESS REPORT (UBR)

00000202 AT

DOCUMENT # A01000001546
 1. Entity Name
ORLANDO CARDIOVASCULAR CENTER, LLLP

Principal Place of Business Mailing Address
1405 SOUTH ORANGE AVE. 1405 SOUTH ORANGE AVE.
SUITE 120 SUITE 120
ORLANDO FL 32806 ORLANDO FL 32806


2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

43-114

FILED
02 AUG 22 PM 1:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DUE BY SEPTEMBER 25, 2002

4. FEI Number **31-1812724** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CLO CONSULTING, INC.
1405 SOUTH ORANGE AVE.
SUITE 120
ORLANDO FL 32806

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record **\$100.00** 10. Amount of Capital Contributions in FLORIDA to date **\$787,500.00** 11. **MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P01000111464 ORLANDO HEART CENTER, INC. <i>N/C amend. filed 1/27/02 - Let</i> 1405 SOUTH ORANGE AVE. ORLANDO FL 32806
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P01000111464 Heart Center Investments, Inc. 1405 South Orange Ave. Orlando, Florida 32806
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<i>1405</i>
CITY-ST-ZIP	900007111289--1
STREET ADDRESS	-08/14/02--01035--023
CITY-ST-ZIP	****541.25 ****541.25
STREET ADDRESS	
CITY-ST-ZIP	FF \$926.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: X *[Signature]* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER** **7/24/2002** **407 425-6226**
Signature and typed or printed name of signing general partner Date Daytime Phone #

CR2E003 (4/02)



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 21, 2002

Agnes Lunt
Document Specialist
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: UBR for Document # A0100001546

Dear Ms. Lunt,

Please note that this is the first notice of filing that I have received for the Orlando Cardiovascular Center, LLLP. There may have been some confusion as we were running two companies with different names at the same address. Regardless, the very first notice I received for the LLLP was in July. The appropriate signatures were obtained and the form promptly mailed.

Check number 407 for \$541.25 and check number 406 for \$1,750 for the supplemental affidavit was processed on August 14, 2002. I appreciate your assistance in getting these documents filed timely.

Sincerely,

Pat Wright
Executive Director