

2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A99000000485

FILED
Feb 14, 2005
Secretary of State

Entity Name: ADVANCED MEDICAL NETWORK, LTD.

Current Principal Place of Business:

825 SE 3RD AVE.
OCALA, FL 33471

New Principal Place of Business:

Current Mailing Address:

825 SE 3RD AVE.
OCALA, FL 33471

New Mailing Address:

FEI Number: 59-3539585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEMP, WINDY A
825 SE 3RD AVE.
OCALA, FL 33471 US

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

Capital Contributions as Shown on record: 11,000.00

Amount of Capital Contributions in Florida to date: 11,000.00

GENERAL PARTNER INFORMATION:

Document #: P98000077214
Name: ADVANCED MEDICAL NETWORK HOLDINGS, INC.
Address: 825 SE 3RD AVE.
City-St-Zip: Ocala, FL 33471

ADDRESS CHANGES ONLY:

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

SIGNATURE: GARY A. THURSTON

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02/14/2005

Electronic Signature of Signing General Partner

Date