

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A99000001204

1. Entity Name
ATLANTIC CARDIOLINK, LTD.



Principal Place of Business
**1305 S. HICKORY STREET
MELBOURNE, FL 32901**

Mailing Address
**1305 S. HICKORY STREET
MELBOURNE, FL 32901**

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN 18 AM 8:50



DO NOT WRITE IN THIS SPACE

03032008 No Chg-LP

CR2E003 (12/06)

4. FEI Number
59-3589124

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KANCILIA, JOHN R ESQ.
1800 WEST HIBISCUS BLVD.
SUITE 138
MELBOURNE, FL 32901**

**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 _____
Signature, typed or printed name

and title if applicable.

4-18-2008
DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00**

600128891706
05/09/08-01006--012 **500.00

**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 # **L99000004408**
NAME **MELBOURNE CARDIAC ASSOCIATES, L.C.**
STREET ADDRESS **1305 S. HICKORY STREET**
CITY-ST-ZIP **MELBOURNE, FL 32901**

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IN THIS SPACE**

B. T. Stock JUN 18 2008

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4-18-2008

STAPLE CHECK HERE