

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000014938

FILED
Apr 30, 2006
Secretary of State

Entity Name: MEDICAL PARK ENTERPRISES, LLC

Current Principal Place of Business:

132 WHITAKER RD., STE. A
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

PMB#261
334 EAST LAKE RD
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-3689477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHN, VANESSA N ESQ.
1110 N. FLORIDA AVENUE
TAMPA, FL 33602 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: REIBER, TYLER D
Address: 132 WHITAKER RD STE #A
City-St-Zip: LUTZ, FL 33688

Title: MGRM () Delete
Name: BEBBER, GREG VAN
Address: 132 WHITAKER RD., STE A
City-St-Zip: LUTZ, FL 33688

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TYLER REIBER

MGRM

04/30/2006

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