

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005368

FILED  
Jan 23, 2005  
Secretary of State

**Entity Name:** HEART & VASCULAR CENTER OF BRADENTON, PLLC

**Current Principal Place of Business:**

2101 61ST STREET WEST  
BRADENTON, FL 34209

**New Principal Place of Business:**

**Current Mailing Address:**

2101 61ST STREET WEST  
BRADENTON, FL 34209

**New Mailing Address:**

**FEI Number:** 65-1094378

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.  
802 11TH STREET WEST  
BRADENTON, FL 34205 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SUBBIONDO, ROBERT J MD  
Address: 2101 61ST ST. WEST  
City-St-Zip: BRADENTON, FL 34209

Title: MGRM ( ) Delete  
Name: PACE, JOSEPH N MD  
Address: 2101 61ST ST. WEST  
City-St-Zip: BRADENTON, FL 34209

Title: MGRM ( ) Delete  
Name: RIVERA, RIVERA MD  
Address: 2101 61ST ST. WEST  
City-St-Zip: BRADENTON, FL 34209

**ADDITIONS/CHANGES:**

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

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 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 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: ROBERT J. SUBBIONDO, MD

MGRM

01/23/2005

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