

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005926

FILED
Aug 10, 2005
Secretary of State

Entity Name: FIRST COAST HEALTHCARE CONSULTANTS LLC

Current Principal Place of Business:

8745 HAMPSHIRE GLEN DR. S.
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8745 HAMPSHIRE GLEN DR. S.
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WILLIAMS, GRADY H JR.
1279 KINGSLEY AVENUE, SUITE 117
ORANGE PARK, FL 32073 US

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: JONES, TUDOR
Address: 8745 HAMPSHIRE GLEN DR. S.
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: COFFMAN, MARGARET
Address: 671 FREDERIC DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: MGRM () Delete
Name: BEARSS, ROLLIN W
Address: 671 FREDERIC DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: TUDOR JONES III

MR

08/10/2005

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