

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011119

FILED
Jan 08, 2004
Secretary of State

Entity Name: CENTRAL FLORIDA OB/GYN SPECIALISTS LLC

Current Principal Place of Business:

455 WEST WARREN AVENUE
LONGWOOD, FL 32750 US

New Principal Place of Business:

Current Mailing Address:

455 WEST WARREN AVENUE
LONGWOOD, FL 32750 US

New Mailing Address:

FEI Number: 59-3732732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARNOLD, MATHENY & EAGAN, P.A.
801 NORTH MAGNOLIA AVENUE, SUITE 201
ORLANDO, FL 32803

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: MGR () Delete
Name: VIRGIL A. DAVILA, M., D. LLC
Address: 585 DUNMAR CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: MGR () Delete
Name: JOHN FARNELLA, JR. M., D. LLC
Address: 8401 VINTAGE DRIVE
City-St-Zip: ORLANDO, FL 32835 US

Title: MGR () Delete
Name: PENNY A. DANNA, M.D., LLC
Address: 1222 HERON DRIVE
City-St-Zip: ORLANDO, FL 32803 US

Title: MGR () Delete
Name: MARK P. BIELAWNY, M., D. LLC
Address: 214 N. BROWN AVENUE
City-St-Zip: ORLANDO, FL 32801 US

Title: MGR (X) Delete
Name: MARC W. BISCHOF, M.D., LLC
Address: 3330 FLORENE DRIVE
City-St-Zip: ORLANDO, FL 32806 US

Title: MGR (X) Delete
Name: ROBERT J. BOWLES, M., D. LLC
Address: 495 FAWN HILL PLACE
City-St-Zip: LAKE FOREST, FL 32771 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SAMUEL L. MCLEOD III, M.D.
Address: 455 WEST WARREN AVENUE
City-St-Zip: LONGWOOD, FL 32750 US

Title: MGR (X) Change () Addition
Name: JOHN FARNELLA, JR. M., D.
Address: 455 WEST WARREN AVENUE
City-St-Zip: LONGWOOD, FL 32750 US

Title: MGR (X) Change () Addition
Name: LEROY RAPHAEL, M.D.,
Address: 455 WEST WARREN AVENUE
City-St-Zip: LONGWOOD, FL 32750 US

Title: MGR (X) Change () Addition
Name: DENNIS J. BUHRING, V, P
Address: 455 WEST WARREN AVENUE
City-St-Zip: LONGWOOD, FL 32750 US

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: SAMUEL L MCLEOD III

MGR

01/08/2004

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