

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014094

FILED
Apr 28, 2005
Secretary of State

Entity Name: CHOICE MEDICAL MANAGEMENT SERVICES, L.L.C.

Current Principal Place of Business:

1408 N. WESTSHORE BLVD
700
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

5951 CATTLE RIDGE BLVD
200
SARASOTA, FL 34232

New Mailing Address:

6010 CATTLE RIDGE DRIVE
SUITE 100
SARASOTA, FL 34232

FEI Number: 59-3742003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLWERT, ANDREW W
5951 CATTERIDGE BLVD, #200
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

OLWERT, ANDREW W
6010 CATTERIDGE DRIVE
SUITE 100
SARASOTA, FL 34232 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: ANDREW W. OLWERT III

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: D () Delete
Name: OLWERT, ANDREW W III
Address: 5951 CATTLERIDGE BLVD, #200
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OLWERT, ANDREW W III
Address: 6010 CATTLERIDGE DRIVE
City-St-Zip: SARASOTA, FL 34232

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: ANDREW W. OLWERT III

MGR

04/28/2005

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