2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015292

Entity Name: JOHN G. SHEDD, M.D., PLC

FILED Apr 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9128 NW HWY 225A OCALA, FL 34482

Current Mailing Address: New Mailing Address:

9128 NW HWY 225A OCALA, FL 34482

FEI Number: 59-3742255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHEDD, JOHN G M.D. 9128 NW HWY 525 A OCALA, FL 34482 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/MEMBERS:

Γitle: P () Delete

 Name:
 SHEDD, JOHN G

 Address:
 9128 NW HWY 225A

 City-St-Zip:
 OCALA, FL 34482

Title: S () Delete Name: SHEDD, CHERYL

Name: SHEDD, CHERYL
Address: 9128 NW HWY 225A
City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition

Name: SHEDD, JOHN G Address: 9128 NW HWY 225A City-St-Zip: OCALA, FL 34482

Title: MGRM (X) Change () Addition

 Name:
 SHEDD, CHERYL

 Address:
 9128 NW HWY 225A

 City-St-Zip:
 OCALA, FL 34482

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: JOHN G. SHEDD MGR 04/04/2005