

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018514

FILED
Feb 28, 2005
Secretary of State

Entity Name: PHILOPATYR PROFESSIONAL CENTER L.L.C.

Current Principal Place of Business:

1199 N. HALIFAX AVENUE
DAYTONA BEACH, FL 32118 US

New Principal Place of Business:

Current Mailing Address:

1199 N. HALIFAX AVENUE
DAYTONA BEACH, FL 32118 US

New Mailing Address:

FEI Number: 94-3411899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISKANDER, ENAS G
1199 N. HALIFAX AVE.
DAYTONA BEACH, FL 32118 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: MGR () Delete
Name: ISKANDER, ENAS G
Address: 1199 NORTH HALIFAX AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MGRM () Delete
Name: ISKANDER, RAFAT S
Address: 1199 NORTH HALIFAX AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES:

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: ENAS G ISKANDER

MGR

02/28/2005

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