2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007860

Entity Name: BMJ OF FLORIDA, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
160 INTERNATIONAL PARKWAY, SUITE 150 HEATHROW, FL 32746	

Current Mailing Address:	**New Mailing Address:**
160 INTERNATIONAL PARKWAY, SUITE 150 HEATHROW, FL 32746	

FEI Number: 58-2667202   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:**
LOWMAN, WILLIAM R JR ESQ 315 E. ROBINSON STREET, SUITE 600 ORLANDO, FL 32801 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: **ADDITIONS/CHANGES:**

Title:	MGR	( ) Delete	Title:		( ) Change ( ) Addition
Name:	MCCLANDON, JOE ANN		Name:		
Address:	1623 BRIDGEWATER DRIVE		Address:		
City-St-Zip:	HEATHROW, FL 32746		City-St-Zip:		

Title:	MGRM	( ) Delete	Title:		( ) Change ( ) Addition
Name:	BUFORD, CAROL A		Name:		
Address:	1690 BRIDGEWATER DRIVE		Address:		
City-St-Zip:	HEATHROW, FL 32746		City-St-Zip:		

Title:	MGRM	( ) Delete	Title:		( ) Change ( ) Addition
Name:	JOHNSON, ROBERT L		Name:		
Address:	211 NEW GATE LOOP		Address:		
City-St-Zip:	HEATHROW, FL 32746		City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CAROL A J BUFORD   MGM   04/29/2006
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date