

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016828

**FILED
Jul 08, 2004
Secretary of State**

Entity Name: JED P. WEBER, M.D. NEUROSURGERY CONSULTANTS, L.L.C.

Current Principal Place of Business:

646 VIRGINIA STREET
SUITE 600
DUNEDIN, FL 34698 US

New Principal Place of Business:

Current Mailing Address:

646 VIRGINIA STREET
SUITE 600
DUNEDIN, FL 34698 US

New Mailing Address:

FEI Number: 81-0559627 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COLBASSANI, CHARLES J
646 VIRGINIA STREET
SUITE 600
DUNEDIN, FL 34698 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: MGRM () Delete
Name: WEBER, JED P M.D.
Address: 646 VIRGINIA STREET, SUITE 600
City-St-Zip: DUNEDIN, FL 34698 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WEBER, JED P M.D.
Address: 646 VIRGINIA STREET, SUITE 600
City-St-Zip: DUNEDIN, FL 34698 US

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: JED P WEBER, MD

MGR

07/08/2004

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