

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018778

FILED  
Aug 29, 2004  
Secretary of State

**Entity Name:** FLORIDA URGENT CARE CENTERS, LLC

**Current Principal Place of Business:**

800 EAST HALLANDALE BEACH BLVD., STE. 26  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

800 EAST HALLANDALE BEACH BLVD., STE. 26  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HARTLEY, TIMOTHY M ESQ.  
2455 EAST SUNRISE BLVD., STE. 511  
FT LAUDERDALE, FL 33304 US

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

HARTLEY, TIMOTHY M ESQ.  
500 SE SIXTH STREET, SUITE 102  
FT LAUDERDALE, FL 33301 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:

08/29/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: FRIEDEWALD, DONALD  
Address: 800 EAST HALLANDALE BEACH BLVD., STE. 26  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: FRIEDEWALD, DON E JR.  
Address: 800 EAST HALLANDALE BEACH BLVD., STE. 26  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGR ( ) Change (X) Addition  
Name: STACHEWITSCH, ANDRE  
Address: 800 EAST HALLANDALE BEACH, BLVD. STE 26  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: DON E. FRIEDEWALD, JR

MGR

08/29/2004

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