

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020178

Entity Name: MEDPRO CENTER, LLC

FILED
May 09, 2007
Secretary of State

Current Principal Place of Business:

13301 SOUTH HWY 475
OCALA, FL 34480

New Principal Place of Business:

Current Mailing Address:

13301 SOUTH HWY 475
OCALA, FL 34480

New Mailing Address:

FEI Number: 82-0558151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RUTLEDGE, KIM
13301 S. HWY 475
OCALA, FL 34480 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/MANAGERS:

Title: MGRM () Delete
Name: FELDMAN, ROBERT L MD
Address: 13301 SOUTH HWY 475
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT FELDMAN

MGRM

05/09/2007

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