

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023857

FILED
Apr 26, 2004
Secretary of State

Entity Name: PHYSICIAN PROPERTIES, LLC

Current Principal Place of Business:

2430 JENKS AVENUE
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

2430 JENKS AVENUE
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 05-0531036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NANJI, KIRAN K
2430 JENKS AVENUE
PANAMA CITY, FL 32405

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: NANJI, KIRAN K
Address: 2430 JENKS AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM () Delete
Name: GAITHER, FRED E II
Address: 2430 JENKS AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM () Delete
Name: PATEL, KETAN A
Address: 489 N. TYNDALL PKWY
City-St-Zip: CALLAWAY, FL 32404

Title: MGRM () Delete
Name: JENSEN, SHAYNE R
Address: 2201 JENKS AVENUE
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES:

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

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

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: KIRAN NANJI

DR

04/26/2004

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