

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026711

FILED
Mar 29, 2006
Secretary of State

Entity Name: HART FAMILY LIMITED LIABILITY COMPANY

Current Principal Place of Business:

6165 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223

New Principal Place of Business:

6149 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223

Current Mailing Address:

6165 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223

New Mailing Address:

6149 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223

FEI Number: 06-1651470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, MELINDA BETH M.D.
6165 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

HART, MELINDA BETH M.D.
6149 MANASOTA KEY ROAD
ENGLEWOOD, FL 34223 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:

03/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HART, MELINDA BETH M.D.
Address: 6165 MANASOTA KEY ROAD
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HART, MELINDA BETH M.D.
Address: 6149 MANASOTA KEY ROAD
City-St-Zip: ENGLEWOOD, FL 34223

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: MELINDA BETH HART

MGRM

03/29/2006

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