


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 01, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L02000029524</b> 1. Entity Name LAKE WORTH OUTPATIENT PROPERTIES, LLC	
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Principal Place of Business 1325 SOUTH CONGRESS AVE. SUITE 211 BOYNTON BEACH, FL 33426	Mailing Address 1325 SOUTH CONGRESS AVE. SUITE 211 BOYNTON BEACH, FL 33426
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**DO NOT WRITE IN THIS SPACE**



02052007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 14-1854187	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MENKHAUS, DAVID J  
2424 NORTH FEDERAL HWY., SUITE 456  
BOCA RATON, FL 33431

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

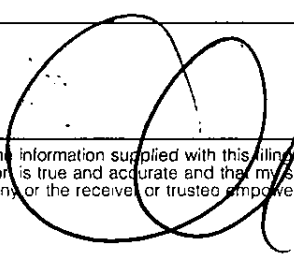
**Filing Fee is \$50.00  
Due by May 1, 2007**

U000000652673  
03/12/07-80028-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DOSCH, MARK R 1325 S. CONGRESS AVE. #211 BOYNTON BEACH, FL 33426
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**  **02/27/07** **561-740-2900**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #