

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030050

Entity Name: SCOTT J. LOESSIN, MD, LLC

FILED
Jan 31, 2005
Secretary of State

Current Principal Place of Business:

311 N. CLYDE MORRIS BLVD., STE. 360
DAYTONA BEACH, FL 32114

New Principal Place of Business:

1890 LPGA BLVD
SUITE 150
DAYTONA BEACH, FL 32117

Current Mailing Address:

311 N. CLYDE MORRIS BLVD., STE. 360
DAYTONA BEACH, FL 32114

New Mailing Address:

1890 LPGA BLVD
SUITE 150
DAYTONA BEACH, FL 32117

FEI Number: 55-0801890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOESSIN, SCOTT J
311 N. CLYDE MORRIS BLVD., STE. 360
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

LOESSIN, SCOTT J
1890 LPGA BLVD.
SUITE 150
DAYTONA BEACH, FL 32117 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:

01/31/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LOESSIN, SCOTT J MD
Address: 311 N. CLYDE MORRIS, #360
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LOESSIN, SCOTT J MD
Address: 1890 LPGA BLVD, SUITE 150
City-St-Zip: DAYTONA BEACH, FL 32117

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: SCOTT J. LOESSIN, M.D.

PRES

01/31/2005

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