

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033687

FILED  
Jan 14, 2005  
Secretary of State

**Entity Name:** EMERALD COAST ORTHOPAEDIC ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

550 W REDSTONE AVE., STE. 300  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

550 W REDSTONE AVE., STE. 300  
CRESTVIEW, FL 32536

**New Mailing Address:**

**FEI Number:** 11-3670686

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FOSTER, WILLIAM SCOTT  
909 MAR WALT DR., STE. 1014  
FORT WALTON BEACH, FL 32547 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ALFRED CARDET, M.D.,  
Address: 550 W REDSTONE AVE., STE. 300  
City-St-Zip: CRESTVIEW, FL 32536

Title: MGRM ( ) Delete  
Name: KOULISIS, CHRISTO W  
Address: 550 W REDSTONE AVE., STE. 300  
City-St-Zip: CRESTVIEW, FL 32536

Title: MGRM (X) Delete  
Name: CHEN, LEO  
Address: 550 W REDSTONE AVE., STE. 300  
City-St-Zip: CRESTVIEW, FL 32536

**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:

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: C.W. KOULISIS

MGRM

01/14/2005

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