

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033862

FILED  
May 05, 2005  
Secretary of State

**Entity Name:** ATLAS MEDICAL TECHNOLOGIES OF FLORIDA, L.L.C.

**Current Principal Place of Business:**

14605 49TH STREET NORTH  
SUITE 13  
CLEARWATER, FL 33762

**New Principal Place of Business:**

**Current Mailing Address:**

14605 49TH STREET NORTH  
SUITE 13  
CLEARWATER, FL 33762

**New Mailing Address:**

**FEI Number:** 43-1995749      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

COHRS, DENIS A  
2575 ULMERTON ROAD  
SUITE 210  
CLEARWATER, FL 33762 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: BREWER, RONALD D PRES.  
Address: 585 FOREST PARKWAY E.  
City-St-Zip: LARGO, FL 33771 US

Title: MGR ( ) Delete  
Name: SCHOLZ, RICHARD H V.PRES  
Address: 1215 WILLOW ICK CIRCLE  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: MGR ( ) Delete  
Name: STOCKTON, RICHARD CFO  
Address: 1137 EAST PHILADELPHIA  
City-St-Zip: ONTARIO, CA 91761 US

**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: RONALD D. BREWER

PRES

05/05/2005

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