## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000002745

Entity Name: LAKEWOOD RANCH PRIMARY CARE, PLLC

FILED Jan 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

8340 LAKEWOOD RANCH BLVD., STE. 350 LAKEWOOD RANCH, FL 34202

Current Mailing Address: New Mailing Address:

8340 LAKEWOOD RANCH BLVD., STE. 350 LAKEWOOD RANCH, FL 34202

FEI Number: 54-2094452 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BLALOCK, LANDERS, WALTERS & VOGLER, P.A. 802 11TH STREET WEST BRADENTON, FL 34205 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/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MISHNER, HARVEY S
 Name:

 Address:
 8340 LAKEWOOD RANCH BLVD., STE. 350
 Address:

 City-St-Zip:
 LAKEWOOD RANCH, FL 34202
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CONTINO, PATRICK J
 Name:

 Address:
 8340 LAKEWOOD RANCH BLVD., STE. 350
 Address:

 City-St-Zip:
 LAKEWOOD RANCH, FL 34202
 City-St-Zip:

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: HARVEY S. MISHNER DR 01/15/2007