2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# L03000015420

Entity Name: MANATEE 701 PARTNERS, LLC

Current Principal Place of Business:

701 MANATEE AVE W
SUITE 202
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

701 MANATEE AVE W
SUITE 202
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 05-0567031 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLALOCK, LANDERS, WALTERS & VOGLER, PA
802 11TH ST. WEST
BRADENTON, FL 34205 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/MANAGERS:

Title:	MGRM	( ) Delete
Name:	GRENIER, MARC MD	
Address:	3812 RIVERVIEW BLVD. W	
City-St-Zip:	BRADENTON, FL 34209	
Title:	MGRM	( ) Delete
Name:	GURUCHARRI, MICHAEL MD	
Address:	707 58TH ST NW	
City-St-Zip:	BRADENTON, FL 34209	
Title:	MGRM	( ) Delete
Name:	HOBAN, BRIAN MD	
Address:	PO BOX 14032	
City-St-Zip:	BRADENTON, FL 34280	
Title:	MGRM	( ) Delete
Name:	KALATHIA, AXAY MD	
Address:	6422 BLUE GROSBEAK CIR	
City-St-Zip:	BRADENTON, FL 34202	
Title:	MGRM	( ) Delete
Name:	MORRISH, THOMAS MD	
Address:	3500 RIVERVIEW BLVD W	
City-St-Zip:	BRADENTON, FL 34209	
Title:	MGRM	( ) Delete
Name:	NALL, AGNES MD	
Address:	1945 LINCOLN DRIVE	
City-St-Zip:	SARASOTA, FL 34236	

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:		
Title:	MGRM	(X) Change ( ) Addition
Name:	KALATHIA, AXAY MD	
Address:	20109 79TH AVE E	
City-St-Zip:	BRADENTON, FL 34202	
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 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: HAZEL FORD MGRM 01/09/2007

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