


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90069 043 ****50.00

DOCUMENT # L03000018790 1. Entity Name SOUTHWEST OB/GYN BUILDING PARTNERS, LLC					
Principal Place of Business 1551 CLAY STREET WINTER PARK, FL 32789			Mailing Address 1551 CLAY STREET WINTER PARK, FL 32789		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 11-3690145	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent WILSTRUP, MARK A MD 1551 CLAY STREET WINTER PARK, FL 32789				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DIEBEL, N. DONALD DR 1551 CLAY STREET WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LAZAR, ARNOLD J DR 1551 CLAY STREET WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WILSTRUP, MARK A DR 1551 CLAY STREET WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERVIS, MATHEW R DR 1551 CLAY STREET WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARDUCCI, THERESA J DR 1551 CLAY STREET WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LOGAN, SHERYL L DR 1551 CLAY STREET WINTER PARK, FL 32789	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____			Date: <u>4/27/07</u> Daytime Phone #: <u>407-644-5371</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

SOUTHWEST OB/GYN BUILDING PARTNERS, LLC

DOCUMENT # L0300018790

2007 UNIFORM BUSINESS REPORT (UBR)

BLOCK 10

<u>TITLE</u>	<u>NAME</u>	<u>STREET ADDRESS</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE</u>
MGR	DR. MARNIQUE H. JONES	1551 CLAY STREET	WINTER PARK	FLORIDA	32789
MGR	DR. DENNISE C. DURKEE	1551 CLAY STREET	WINTER PARK	FLORIDA	32789
MGR	DR. MICHAEL BARTFIELD	1551 CLAY STREET	WINTER PARK	FLORIDA	32789
MGR	DR. ANN MARIE D'HEUREUX-JONES	1551 CLAY STREET	WINTER PARK	FLORIDA	32789
MGR	DR. AMANPREET BHULLAR	1551 CLAY STREET	WINTER PARK	FLORIDA	32789

Attachment
L03000018790