2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# L03000022689

Entity Name: PARK MEADOWS PROFESSIONAL CENTER, LLC

Current Principal Place of Business:

1930 PARK MEADOWS DRIVE
STE 1
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

1930 PARK MEADOWS DRIVE
STE 1
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-0051891 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DEAN, CONSTANCE A
1930 PARK MEADOWS DRIVE
1
FORT MYERS, FL 33907 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:	DEAN, CONSTANCE A	
Address:	1930 PARK MEADOWS DRIVE, STE 1	
City-St-Zip:	FORT MYERS, FL 33907	
Title:	MGRM	( ) Delete
Name:	HAUSER, PETER T	
Address:	19650 PINE ECHO ROAD	
City-St-Zip:	N FORT MYERS, FL 33917	

ADDITIONS/CHANGES:

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: CONI DEAN MGRM 07/01/2004

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