

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022689

FILED
Apr 28, 2005
Secretary of State

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 ()

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

MGMR

04/28/2005

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