

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000025671

Entity Name: MED PLAZA, LLC

FILED  
Jan 26, 2005  
Secretary of State

**Current Principal Place of Business:**

200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236

**New Principal Place of Business:**

8871 FISHERMENS BAY DRIVE  
SARASOTA, FL 34231

**Current Mailing Address:**

8871 FISHERMANS BAY DR.  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: 20-0180877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WAGNER, E. JOHN III  
200 SOUTH ORANGE AVE.  
SARASOTA, FL 34236 US

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

GETZEN, JAMES W  
8871 FISHERMENS BAY DRIVE  
SARASOTA, FL 34231 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: JAMES GETZEN

01/26/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: GETZEN, MINTA M  
Address: 8871 FISHERMANS BAY DRIVE  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES:**

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: MINTA GETZEN

MGRM

01/26/2005

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