## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000029189

Apr 25, 2006 Secretary of State

**FILED** 

Entity Name: FLORIDA WEST COAST MEDICAL BILLING, L.L.C.

Current Principal Place of Business: New Principal Place of Business:

212 WINDWARD ISLE 9212 ULMERTON RD CLEARWATER, FL 33767 LARGO, FL 33772

Current Mailing Address: New Mailing Address:

P. O BOX 7048 SEMINOLE, FL 33775

FEI Number: 86-1076199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GASSMAN, ALAN

1245 COURT ST., STE. 102

CLEARWATER, FL 33756 US

FRIEDMAN, CHARLES

6640 78TH AVE N

STE A

PINELLAS PARK, FL 33781 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: CHARLES K,. FRIEDMAN 04/25/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FRIEDMAN, CHARLES K
 Name:

 Address:
 P O BOX 7048
 Address:

 City-St-Zip:
 SEMINOLE, FL 33775
 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: CHARLES K. FRIEDMAN MGR 04/25/2006