

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043753

Entity Name: STRATA HEALTHCARE, LLC

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

950 S PINE ISLAND RD A150-1074
PLANTATION, FL 33324

New Principal Place of Business:

7901 S.W. 6TH COURT
SUITE 400
PLANTATION, FL 33324

Current Mailing Address:

950 S PINE ISLAND RD A150-1074
PLANTATION, FL 33324

New Mailing Address:

7901 S.W. 6TH COURT
SUITE 400
PLANTATION, FL 33324

FEI Number: 20-0381757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, GARY
100 S ASHLEY DR, STE 1500
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

WALKER, GARY
202 SOUTH ROME AVENUE
SUITE 100
TAMPA, FL 33606 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:

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MCKINNON, RUSSELL
Address: 950 S PINE ISLAND RD A150-1074
City-St-Zip: PLANTATION, FL 33324

Title: MGRM (X) Delete
Name: ROLLINSON, CHARLES H
Address: 950 S PINE ISLAND RD A150-1074
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ROLLINSON, CHARLES H 111
Address: 7901 S.W. 6TH COURT
City-St-Zip: PLANTATION, FL 33324

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: CHARLES H. ROLLINSON III

MGR

04/28/2005

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