2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# L03000047987

Entity Name: MY DOCTOR, L.L.C.

Current Principal Place of Business:

3114 DEL PRADO BLVD S
CAPE CORA, FL 33904

New Principal Place of Business:

3114 DEL PRADO BLVD S
CAPE CORAL, FL 33904

Current Mailing Address:

3114 DEL PRADO BLVD S
CAPE CORA, FL 33904

New Mailing Address:

3114 DEL PRADO BLVD S
CAPE CORAL, FL 33904

FEI Number: 51-0490918 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, BECKY
3114 DEL PRADO BLVD. S.
CAPE CORAL, FL 33904 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: SCOTT, BECKY M
Address: 3114 DEL PRADO BLVD S
City-St-Zip: CAPE CORAL, FL 33904

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: BECKY M. SCOTT MGRM 04/26/2005

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