

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000010444

FILED  
Dec 06, 2006  
Secretary of State

Entity Name: PRIORITY ACCESS CARE, LLC

**Current Principal Place of Business:**

1172 GOODLETTE FRANK RD  
201  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

641 INLET DRIVE  
MARCO ISLAND, FL 34145

**New Mailing Address:**

FEI Number: 20-1715811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEIGHTOL, JOANNE  
641 INLET DRIVE  
MARCO ISLAND, FL 34145 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/MANAGERS:**

Title: PRES ( ) Delete  
Name: BEIGHTOL, NEAL  
Address: 641 INLET DRIVE  
City-St-Zip: NAPLES, FL 34145 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: JOANNE, BEIGHTOL  
Address: 641 INLET DRIVE  
City-St-Zip: NAPLES, FL 34145

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: NEAL BEIGHTOL

PRES

12/06/2006

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