

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011770

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: PINELLAS ENDOSCOPY CENTER, LLC

## Current Principal Place of Business:

3901 66TH STREET NORTH  
SUITE 201  
ST. PETERSBURG, FL 33709

## New Principal Place of Business:

1099 5TH AVE NORTH  
SUITE 100  
ST. PETERSBURG, FL 33705

## Current Mailing Address:

3901 66TH STREET NORTH  
SUITE 201  
ST. PETERSBURG, FL 33709

## New Mailing Address:

1099 5TH AVE NORTH  
SUITE 100  
ST. PETERSBURG, FL 33705

FEI Number: 20-2626180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOX, GREGORY A  
28050 U.S. 19 NORTH  
SUITE 100  
CLEARWATER, FL 33761 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: MGR ( ) Delete  
Name: DESAI, CHETAN MD  
Address: 3901 66TH STREET NORTH, SUITE 201  
City-St-Zip: ST. PETERSBURG, FL 33709

Title: MGR ( ) Delete  
Name: PATEL, GIRISH MD  
Address: 2191 9TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33713

Title: MGR ( ) Delete  
Name: GLAMOUR, TEJINDER MD  
Address: 5800 49TH STREET NORTH, SUITE 102S  
City-St-Zip: ST. PETERSBURG, FL 33709

## ADDITIONS/CHANGES:

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

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

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 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: CHETAN DESAI

MGR

01/17/2007

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