2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014925

Address:

City-St-Zip:

Entity Name: THE HOUSE DOCTOR OF BREVARD, LLC

661 COCOANUT GROVE AVENUE

WEST MELBOURNE, FL 329042134 US

FILED May 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 661 COCOANUT GROVE AVENUE WEST MELBOURNE, FL 329042134 US **Current Mailing Address: New Mailing Address:** 661 COCOANUT GROVE AVENUE WEST MELBOURNE, FL 329042134 US FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATTERSON, WENDY P 661 COCOANUT GROVE AVENUE WEST MELBOURNE, FL 329042134 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete PATTERSON, JAMES A Name: Name: Address: 661 COCOANUT GROVE AVENUE Address: City-St-Zip: WEST MELBOURNE, FL 329042134 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PATTERSON, WENDY P 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: WENDY PAIGE PATTERSON MGM 05/09/2006