

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000022322

FILED
Jan 16, 2005
Secretary of State

Entity Name: MEDICAID PLANNING AND INFORMATION CENTER, L.L.C.

Current Principal Place of Business:

13710 US HWY 441
SUITE 100
LADY LAKE, FL 32159

New Principal Place of Business:

Current Mailing Address:

13710 US HWY 441
SUITE 100
LADY LAKE, FL 32159

New Mailing Address:

FEI Number: 20-0952421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLHORN, ERIC C
13710 US HWY 441
SUITE 100
LADY LAKE, FL 32159 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: MGR () Delete
Name: MILLHORN, ERIC C
Address: 13710 US HWY 441 SUITE 100
City-St-Zip: LADY LAKE, FL 32159

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

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: MILLHORN, MICHAEL D
Address: 13710 US HWY 441 SUITE 100
City-St-Zip: LADY LAKE, FL 32159

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: ERIC C MILLHORN

MGR

01/16/2005

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