2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041374

Entity Name: ORLANDO S. MUNIZ, M.D., L.L.C.

FILED Feb 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4230 HOSPITAL DR, STE 209 MARIANNA, FL 32446

Current Mailing Address: New Mailing Address:

4230 HOSPITAL DR, STE 209 MARIANNA, FL 32446

FEI Number: 20-1524443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRADEN, LISA

4623 FOREST HILL BLVD, STE 111

WEST PALM BEACH, FL 33415 US

MUNIZ, ORLANDO

4230 HOSPITAL DRIVE

209

MARIANNA, FL 32446 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: ORLANDO S MUNIZ 02/21/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 MUNIZ, ORLANDO S
 Name:

 Address:
 4230 HOSPITAL DR, STE 209
 Address:

 City-St-Zip:
 MARIANNA, FL 32446
 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: ORLANDO S MUNIZ MGR 02/21/2006