## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000049083

Entity Name: EMERGENCY MEDICINE SPECIALISTS OF PARKWAY, L.C.

**FILED** Apr 25, 2006 Secretary of State

US

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

C/O QUALITY MEDICAL MANAGEMENT, L.C. 5401 POLK STREET

3900 HOLLYWOOD BLVD., STE. 101 HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021

**Current Mailing Address:** 

C/O QUALITY MEDICAL MANAGEMENT, L.C. P.O. BOX 813729

3900 HOLLYWOOD BLVD., STE. 101 HOLLYWOOD, FL 330813729 US HOLLYWOOD, FL 33021

FEI Number: 20-1319608 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

**New Mailing Address:** 

ADDITIONS/CHANGES:

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

STERN, STEVEN J STERN, STEVEN J C/O QUALITY MEDICAL MANAGEMENT, L.C. 5401 POLK STREET 3900 HOLLYWOOD BLVD., STE. 101 HOLLYWOOD, FL 33021

HOLLYWOOD, FL 33021 ÚS

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: 04/25/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete

(X) Change ( ) Addition MIAMI EMS, MM, L.C., MIAMI EMS, MM, L.C., Name: Name:

Address: C/O QMM, 3900 HOLLYWOOD BLVD., STE. 101 Address: 5401 POLK STREET City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: HOLLYWOOD, FL 33021 US

Title: MGR Title: MGR (X) Change ( ) Addition ( ) Delete Name: MEMS, TM, L.C., Name: MEMS, TM, L.C.,

Address: 3900 HOLLYWOOD BLVD Address: 5401 POLK STREET City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021

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: ARTHUR DISKIN 04/25/2006