

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060536

FILED
Apr 26, 2007
Secretary of State

Entity Name: MULTI-SPECIALTY MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

13833 WELLINGTON TRACE, SUITE E4-487
WELLINGTON, FL 33414

New Principal Place of Business:

1112 WESTON ROAD, STE 117
WESTON, FL 33326

Current Mailing Address:

13833 WELLINGTON TRACE, SUITE E4-487
WELLINGTON, FL 33414

New Mailing Address:

1112 WESTON ROAD, STE 117
WESTON, FL 33326

FEI Number: 20-1511681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST.
STE. 1
TALLAHASSEE, FL 323011283 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: P () Delete
Name: WALL, APRIL
Address: 229 CORRAL AVE.
City-St-Zip: SUNNYVALE, CA 94086

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: WALL, APRIL
Address: 1112 WESTON ROAD, STE 117
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify 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: APRIL WALL

P

04/26/2007

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