

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060662

FILED
Aug 02, 2005
Secretary of State

Entity Name: INFOCUS HEALTHCARE SYSTEMS, LLC

Current Principal Place of Business:

10712 CORY LAKE DRIVE
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

10712 CORY LAKE DRIVE
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 20-1496184 FEI Number Applied For () FEI Number Not Applicable () 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:

SPIRO, ALEXANDER C
10712 CORY LAKE DRIVE
TAMPA, FL 33647 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:

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

ADDITIONS/CHANGES:

Title: DR. () Change (X) Addition
Name: SPIRO, ALEXANDER C
Address: 10712 CORY LAKE DRIVE
City-St-Zip: TAMPA, FL 33647 US

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: A. CYRIL SPIRO

DR.

08/02/2005

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