## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000071398

Entity Name: RIVERWALK ENDOSCOPY CENTER, L.L.C.

**FILED** Feb 11, 2005 Secretary of State

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

6563 DANIEL COURT 8380 RIVERWALK PARK BLVD FT. MYERS, FL 33908

SUITE 200

FT. MYERS, FL 33919

**Current Mailing Address: New Mailing Address:** 

6563 DANIEL COURT 8380 RIVERWALK PARK BLVD

SUITE 200 FT. MYERS, FL 33908 FT. MYERS, FL 33919

FEI Number: 20-1692912 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:

KNOTT, GEORGE H ESQ. 1625 HÉNDRY STREET SUITE 301 FT. MYERS, FL 33901

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: ADDITIONS/CHANGES:

MGRM ( ) Delete Title: () Change () Addition

KESSEL, EVELYN R MD Name: Name: Address: 6563 DANIEL COURT Address: City-St-Zip: FT. MYERS, FL 33908 City-St-Zip:

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: EVELYN R KESSEL, MD **MMBR** 02/11/2005