

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000074838

FILED
Jul 10, 2006
Secretary of State

Entity Name: 1ST AMERICAN FAMILY MEDICAL ASSOCIATES, LLC

Current Principal Place of Business:

1226 MARINER BLVD.
SPRING HILL, FL 34608

New Principal Place of Business:

120 MEDICAL BLVD.
SUITE 103
SPRING HILL, FL 34609

Current Mailing Address:

1226 MARINER BLVD.
SPRING HILL, FL 34608

New Mailing Address:

120 MEDICAL BLVD.
SUITE 103
SPRING HILL, FL 34609

FEI Number: 59-3787086 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:

NAPOLITANO, PETER A ESQ.
8406 MASSACHUSETTS AVENUE, SUITE A-1
NEW PORT RICHEY, FL 34653 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: MGR () Delete
Name: BLACKBURN, ROBERT G D.O.
Address: 1226 MARINER BLVD.
City-St-Zip: SPRING HILL, FL 34609 US

Title: MGRM () Delete
Name: GROVE, JEFFREY S D.O.
Address: 1226 MARINER BLVD.
City-St-Zip: SPRING HILL, FL 34609 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BLACKBURN, ROBERT G D.O.
Address: 120 MEDICAL BLVD., SUITE 103
City-St-Zip: SPRING HILL, FL 34609 US

Title: MGRM (X) Change () Addition
Name: GROVE, JEFFREY S D.O.
Address: 120 MEDICAL BLVD., SUITE 103
City-St-Zip: SPRING HILL, FL 34609 US

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: ROBERT G. BLACKBURN, D.O.

MGR

07/10/2006

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