

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080105

FILED
Mar 15, 2005
Secretary of State

Entity Name: M.T. CAUSLEY PRIVATE PROVIDER SERVICES OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

97 N.E. 15TH STREET
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

97 N.E. 15TH STREET
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 20-1847480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIVELLINI, PETER A
911 CHESTNUT STREET
CLEARWATER, FL 33756 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/MEMBERS:

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: CAUSLEY, MICHAEL T
Address: 97 N.E. 15TH STREET
City-St-Zip: HOMESTEAD, FL 33030 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: MICHAEL T. CAUSLEY

MGRM

03/15/2005

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