2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094305

CLASS, MICHELLE

SARASOTA, FL 34230

P.O. BOX 3319

Name:

Address:

City-St-Zip:

Entity Name: PRACTICE RESOURCES, LLC

FILED Mar 23, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 3319 SARASOTA, FL 34230 **Current Mailing Address: New Mailing Address:** P.O. BOX 3319 SARASOTA, FL 34230 FEI Number: 20-2097872 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: CLASS, STEVEN 1921 WALDERMERER STREET, STE 512 SARASOTA, FL 34239 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: MGR () Delete Title: () Change () Addition CLASS, STEVEN Name: Name: Address: P.O. BOX 3319 Address: City-St-Zip: SARASOTA, FL 34230 City-St-Zip: Title: MGR () Delete Title: () Change () Addition

Name:

Address:

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: STEVEN J CLASS MGR 03/23/2005