

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000029299

FILED
May 15, 2006
Secretary of State

Entity Name: INTERNAL MEDICINE GROUP, BRENDA H. SALTER M.D. LLC

Current Principal Place of Business:

474 SABAL TRAIL CIRCLE
LONGWOOD, FL 32779

New Principal Place of Business:

3840 CALEDONIA AVE
APOPKA, FL 32712

Current Mailing Address:

474 SABAL TRAIL CIRCLE
LONGWOOD, FL 32779

New Mailing Address:

3840 CALEDONIA AVE
APOPKA, FL 32712

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: MGRM () Delete
Name: SALTER, BRENDA
Address: 474 SABAL TRAIL CIRCLE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SALTER, BRENDA
Address: 3840 CALEDONIA AVE
City-St-Zip: APOPKA, FL 32712

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: BRENDA H SALTER

MGRM

05/15/2006

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