2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 12, 2006
Secretary of State

DOCUMENT# L05000034077

Entity Name: STELA TUDORAN MEDICAL PRACTICE, LLC

Current Principal Place of Business:

1000 N.W. 9TH STREET, SUITE 203
BOCA RATON, FL

New Principal Place of Business:

Current Mailing Address:

1000 N.W. 9TH STREET, SUITE 203
BOCA RATON, FL

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

PRESLEY, MICHAEL R
3452 W. BOYNTON BEACH BLVD., SUITE 5
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

ADLER, LAUREL W
20417 SAN RAFAEL COURT
BOCA RATON, FL 33498 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: LAUREL W ADLER 07/12/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: TUDORAN, STELA
Address: 1000 N.W. 9TH STREET, SUITE 203
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES:

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 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: STELA TUDORAN PRES 07/12/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date