

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089405

FILED
May 01, 2007
Secretary of State

Entity Name: CLEARWATER CARDIOVASCULAR PROPERTIES BARDMOOR I, LLC

Current Principal Place of Business:

455 PINELLAS STREET, SUITE 400
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

455 PINELLAS STREET, SUITE 400
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 20-3700725 **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:

Name and Address of New Registered Agent:

ANGELICI, LINA ESQ
WILLIAMS SCHIFINO MANGIONE & STEADY, P.A.
ONE TAMPA CITY CENTER, SUITE 2600
TAMPA, FL 33602 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: MR. () Delete
Name: SIMMONS, FREDERIC R
Address: 455 PINELLAS ST., SUITE 400
City-St-Zip: CLEARWATER, FL 33756

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 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: FREDERIC R. SIMMONS

MR.

05/01/2007

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