

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092278

Entity Name: NORTH PARK, L.L.C.

FILED
Jul 16, 2006
Secretary of State

Current Principal Place of Business:

2320 N. ORANGE AVENUE
SUITE 201
ORLANDO, FL 32804 US

Current Mailing Address:

2320 N. ORANGE AVENUE
SUITE 201
ORLANDO, FL 32804 US

New Principal Place of Business:

1040 37TH PLACE
SUITE 101
VERO BEACH, FL 32960 US

New Mailing Address:

P. O. BOX 643383
VERO BEACH, FL 32964 US

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:

WEATHERFORD, WILLIAM P JR
1150 LOUISIANA AVENUE
SUITE 4
WINTER PARK, FL 32789 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/MANAGERS:

Title: MGR () Delete
Name: STOWE, CARY L M.D.
Address: 2320 N. ORANGE AVENUE, SUITE 201
City-St-Zip: ORLANDO, FL 32804 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STOWE, CARY L M.D.
Address: 1040 37TH PLACE, SUITE 101
City-St-Zip: VERO BEACH, FL 32960 US

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: CARY L. STOWE, MD

MGR

07/16/2006

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