2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2006
Secretary of State

DOCUMENT# L05000098152

Entity Name: SPINE CENTER OF EXCELLENCE, LLC

Current Principal Place of Business:

11906 OAK TRAIL WAY
PORT RICHEY, FL 34668 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5849
HUDSON, FL 34674 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

TORRENCE, ALFRED W JR
6645 RIDGE ROAD
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

GIANNAKOPOULOS, GEORGE
11906 OAK TRAIL WAY
PORT RICHEY, FL 34668 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: GEORGE GIANNAKOPOULOS 05/04/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GIANNAKOPOULOS, GEORGE
Address: P.O. BOX 5849
City-St-Zip: HUDSON, FL 34674 US

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: GEORGE GIANNAKOPOULOS MGRM 05/04/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date