

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jun 13, 2007 8:00 am
Secretary of State

05-22-2007 90343 001 ***100.00

DOCUMENT # L06000007796 1. Entity Name PALM BEACH COMMONS CARDIOLOGY LLC					
Principal Place of Business 600 UNIVERSITY BLVD 200 JUPITER FL 33458			Mailing Address 600 UNIVERSITY BLVD 200 JUPITER FL 33458		
2. Principal Place of Business - No P.O. Box # 601 University Blvd Ste Suite, Apt. #, etc. Suite 206 City & State Jupiter FL Zip 33458			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 20-4574798			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent PANCZAK, STEVE 600 UNIVERSITY BLVD 200 JUPITER FL 33458			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when registering) DATE _____					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BREUER, GABRIEL 600 UNIVERSITY BLVD JUPITER FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CRANDALL, CHAUNCEY IV 600 UNIVERSITY BLVD JUPITER FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VARGAS, AGUSTIN 600 UNIVERSITY BLVD JUPITER FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VILLA, AUGUSTO 600 UNIVERSITY BLVD JUPITER FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VARGAS, AGUSTIN 600 UNIVERSITY BLVD JUPITER FL 33458	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Stephen D. Pope</i> CEO/Registered Agent			5-16-2007 (561) 627-2210		
SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		