

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000017429

FILED
Nov 01, 2007
Secretary of State

Entity Name: PROGRESSIVE MEDICAL CONSULTANTS, LLC

Current Principal Place of Business:

4707 W. GANDY BLVD.
SUITE 15
TAMPA, FL 33611 US

New Principal Place of Business:

Current Mailing Address:

4707 W. GANDY BLVD.
SUITE 15
TAMPA, FL 33611 US

New Mailing Address:

FEI Number: 20-4363926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COATS, JR., JON B ESQ.
5022 73RD AVENUE
PINELLAS PARK, FL 33781 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: MGRM () Delete
Name: SMITH, MATTHEW M
Address: 540 CARILLON PARKWAY, #2123
City-St-Zip: ST. PETERSBURG, FL 33716 US

Title: MGRM (X) Delete
Name: MORGAN, LINDA H
Address: 4707 W. GANDY BLVD., SUITE 15
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MATTHEW MCCLAIN SMITH

MGRM

11/01/2007

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