

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038273

FILED
Apr 12, 2012
Secretary of State

Entity Name: DOWNTOWN MEDICAL PARTNERS LLC

Current Principal Place of Business:

C/O KOCHMAN & ZISKA PLC
222 LAKEVIEW AVENUE, SUITE 950
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O KOCHMAN & ZISKA PLC
222 LAKEVIEW AVENUE, SUITE 950
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 56-2586481 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ZISKA, MAURA A ESQ.
KOCHMAN & ZISKA PLC
222 LAKEVIEW AVENUE, SUITE 950
WEST PALM BEACH, FL 33401 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
Name: ZISKA, MAURA A ESQ.
Address: 222 LAKEVIEW AVENUE, SUITE 950
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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: MAURA A. ZISKA MGR 04/12/2012

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