2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045780

Address:

City-St-Zip:

Entity Name: JACKSONVILLE INFECTIOUS DISEASES, LLC

FILED Apr 20, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
P.O. BOX 17577 JACKSONVILLE, FL 322457577		SUITE 200	11555 CENTRAL PARKWAY SUITE 200 JACKSONVILLE, FL 32224	
Current Mailing Address:		New Mailing Address:		
P.O. BOX 17577 JACKSONVILLE, FL 32	22457577			
FEI Number: 20-4812029	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
REZNICSEK, RICK M 240 PONTE VEDRA PA PONTE VEDRA BEACH				
The above named entity in the State of Florida.	submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both	
SIGNATURE:				
Electronic Signature of Registered Age		ent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: () Delete	Title: MGR Name: CHANG. HI	()Change(X)Addition ERNAN R	

Address:

City-St-Zip:

P. O. BOX 17577 JACKSONVILLE, FL 32245

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: HERNAN ROBERT CHANG, M,D, 04/20/2007