

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073709

FILED  
May 28, 2007  
Secretary of State

Entity Name: LINCOLN MEDICAL OFFICE SOLUTIONS, LLC

**Current Principal Place of Business:**

10701 SIERRA VISTA PLACE  
TAMPA, FL 33626 US

**New Principal Place of Business:**

**Current Mailing Address:**

10701 SIERRA VISTA PLACE  
TAMPA, FL 33626 US

**New Mailing Address:**

FEI Number: 20-5280710      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

MARTIN, TYSON  
10701 SIERRA VISTA PLACE  
TAMPA, FL 33626 US

**Name and Address of New Registered Agent:**

SHAUGHNESSY, MICHAEL  
10701 SIERRA VISTA PLACE  
TAMPA, FL 33626 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: MICHAEL SHAUGHNESSY

05/28/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MARTIN, TYSON  
Address: 10701 SIERRA VISTA PLACE  
City-St-Zip: TAMPA, FL 33626 US

Title: MGRM ( ) Delete  
Name: SHAUGHNESSY, MICHAEL  
Address: 16112 MARSHFIELD DRIVE  
City-St-Zip: TAMPA, FL 33624 US

**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: MICHAEL SHAUGHNESSY

MGRM

05/28/2007

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