

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083511

FILED
Jan 10, 2007
Secretary of State

Entity Name: PRODIGY MEDICAL PROFESSIONALS LLC

Current Principal Place of Business:

1621 RIPLEY RUN
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 540156
GREENACRES, FL 33454 US

New Mailing Address:

FEI Number: 20-5448620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, TERRENCE N II
600 NORTHLAKE BLVD.
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

LICHTMAN, ARTHUR M CPA
12773 WEST FOREST HILL BLVD
SUITE 203
WELLINGTON, FL 33414 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: ARTHUR M LICHTMAN, CPA

01/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VANDIVER, YVETTE
Address: 222 SEA BREEZE CIR.
City-St-Zip: JUPITER, FL 33477 US

Title: MGRM () Delete
Name: PINE-GRIMALDI, ANDREA
Address: 1621 RIPLEY RUN
City-St-Zip: WELLINGTON, FL 33414 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 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: YVETTE VANDIVER

MGRM

01/10/2007

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