

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101492

Entity Name: PRIVATE PHYSICIANS, PLC

FILED
Feb 23, 2007
Secretary of State

Current Principal Place of Business:

900 E. OCEAN BLVD., STE. 250
STUART, FL 34994

New Principal Place of Business:

900 E. OCEAN BLVD., STE. 250F
STUART, FL 34994

Current Mailing Address:

900 E. OCEAN BLVD., STE. 250
STUART, FL 34994

New Mailing Address:

900 E. OCEAN BLVD., STE. 250F
STUART, FL 34994

FEI Number: 20-5777950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN, CHERYL
900 E. OCEAN BLVD., STE. 250
STUART, FL 34994 US

Name and Address of New Registered Agent:

JORDAN, CHERYL
900 E. OCEAN BLVD., STE. 250F
STUART, FL 34994 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: CHERYL JORDAN

02/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JORDAN, CHERYL
Address: 900 E. OCEAN BLVD., STE. 250
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JORDAN, CHERYL
Address: 900 E. OCEAN BLVD., STE. 250F
City-St-Zip: STUART, FL 34994

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: CHERYL JORDAN

MNGR

02/23/2007

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