

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038929

FILED
May 10, 2008
Secretary of State

Entity Name: STRATEGIC PHYSICIAN SOLUTIONS, LLC

Current Principal Place of Business:

310 EAST PINE ST #150
ORLANDO, FL 32810

New Principal Place of Business:

4048 EVANDER DRIVE
ORLANDO, FL 32812

Current Mailing Address:

4048 EVANDER DR
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 42-1727560 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:

WALKER, JEFF
4048 EVANDER DR
ORLANDO, FL 32812 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: MGRM () Delete
Name: UHRAN, TERRY
Address: 1942 PALM VIEW DR
City-St-Zip: APOPKA, FL 32712

Title: MGRM () Delete
Name: WALKER, JEFFREY E
Address: 4048 EVANDER DR
City-St-Zip: ORLANDO, FL 32812

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: JEFREY E. WALKER

MGRM

05/10/2008

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