

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059161

Entity Name: OB/GYN ON CALL PLLC

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

12959 PALMS WEST DRIVE
STE 130
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

12959 PALMS WEST DRIVE
STE 130
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 26-0301240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

DAVID, ADLER L DO
12959 PALMS WEST DRIVE
SUITE 130
LOXAHATCHEE, FL 33470 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: DAVID ADLER, DO

01/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALDER, DAVID DO
Address: 12959 PALMS WEST DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM () Delete
Name: TORRES, EMILIO MD
Address: 12959 PALMS WEST DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM (X) Delete
Name: KORNESTEIN, MARCO MD
Address: 12959 PALMS WEST DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADLER, DAVID DO
Address: 12959 PALMS WEST DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

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: DAVID ADLER

DO

01/04/2008

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