
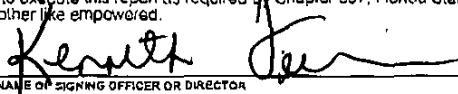


FILED
Aug 27, 2007 8:00 am
Secretary of State

08-27-2007 90031 007 ***550.00

**2007 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # L25654 1. Entity Name SOUTHWEST ORLANDO MEDICAL SERVICES, INC.					
Principal Place of Business 9430 TURKEY LAKE ROAD., STE 206 ORLANDO, FL 32819			Mailing Address 215 NORTH EOLA DRIVE ORLANDO, FL 32801		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 59-2977239	
City & State Zip		City & State Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FEUER, KENNETH R MD 9430 TURKEY LAKE RD. STE. 206 ORLANDO, FL 32819				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FEUER, KENNETH MD 9430 SAND LAKE RD., STE. 206 ORLANDO, FL 32819	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MEYER, ROBERT MD 9430 SAND LAKE ROAD, STE. 206 ORLANDO, FL 32819	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BYRNE, PAUL 9430 TURKEY LAKE RD., STE. 206 ORLANDO, FL 32819	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRNEUNING, PHIL 9430 TURKEY LAKE RD, STE 206 ORLANDO, FL 32819	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR KENNETH FEUER, M.D., PRESIDENT					

ATTACHMENT

215 NORTH EOLA DRIVE
ORLANDO, FLORIDA 32801

40130294
#L23654
450 SOUTH ORANGE AVENUE, SUITE 250
ORLANDO, FLORIDA 32801

LOWNDES
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POST OFFICE BOX 2809, ORLANDO, FLORIDA 32802-2809

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GAIL S. ANDRÉ
CORPORATE PARALEGAL

South Orange Avenue Office

Direct Dial: (407) 418-6203

E-mail: gail.andre@lowndes-law.com

July 9, 2007

Kenneth R. Feuer, M.D.
Southwest Orlando Medical Services, Inc.
9430 Turkey Lake Road, Suite 206
Orlando, Florida 32819

Re: Southwest Orlando Medical Services, Inc.

Dear Dr. Feuer:

Enclosed herewith please find a Notice of Intent to Dissolve the above-referenced corporation received from the Department of State. Please note that the postcard is a reminder that the corporation will be administratively dissolved if the 2007 For Profit Corporation Annual Report ("Annual Report") is not filed by September 5, 2007. To expedite the filing of the Annual Report, the state has offered the following filing options:

- (1) You can visit the state's website at www.sunbiz.org and file the Annual Report online; or
- (2) You can download a preprinted form from www.sunbiz.org and submit the form and filing fees by mail.

In order to save you time, we have downloaded and enclosed a preprinted form of the Annual Report. The Annual Report **must be filed with the Department of State on or before September 5, 2007** in order to avoid a reinstatement fee in the amount of \$600.00 in addition to the \$150.00 filing fee. The officers and directors of the corporation could be liable for corporate obligations incurred after dissolution.

Please review the Annual Report to determine if the information listed is accurate and, if not, please make the necessary changes or additions.

If it is your desire to have our office file the report on behalf of the corporation, please return the completed Annual Report to me, together with a check made payable to the Department of State in the amount of **\$550.00** for the filing fees. We will then file the Annual Report with the Department of State.

Kenneth R. Feuer, M.D.
July 9, 2007
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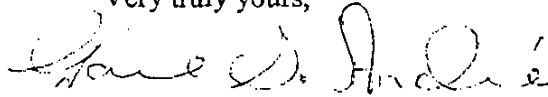
ATTACHMENT

40130294

L25654

Thank you for your assistance in this matter. If you have any questions concerning the above information, please do not hesitate to contact me.

Very truly yours,



Gail S. André
Corporate Paralegal to
James F. Heekin, Jr.

GSA

Enclosures

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c: James F. Heekin, Jr., Esquire