2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 14, 2006
Secretary of State

DOCUMENT# L95000000316

Entity Name: MADISON HEALTH INVESTORS, L.C.

Current Principal Place of Business:

5528 VALLEYPOINTE PARKWAY
BUILDING B SUITE 1
ROANOKE, VA 24019

New Principal Place of Business:

1978 8TH AVENUE NW
HICKORY, NC 28601

Current Mailing Address:

5228 VALLEYPOINTE PARKWAY
BUILDING B SUITE 1
ROANOKE, VA 24019

New Mailing Address:

1978 8TH AVENUE NW
HICKORY, NC 28601

FEI Number: 54-1760660 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

JOHN F. GILROY, III, P.A.
1435 PIEDMONT DR. E., SUITE 100
TALLAHASSEE, FL 32308 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: MGR ( ) Delete
Name: TREFZGER, CHARLES E
Address: 56 THIRD ST. NW
City-St-Zip: HICKORY, NC 28601

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: TREFZGER, CHARLES E
Address: 1978 8TH AVENUE NW
City-St-Zip: HICKORY, NC 28601

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: MELVIN E. WOODWARD, JR CFO 07/14/2006

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