2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000230

Title:

Name:

Address:

City-St-Zip:

MGRM

() Delete

MCCOMB, WILLIAM E

2828 S. TAMIAMI TRAIL

SARASOTA, FL 34239

FILED Jan 09, 2006 Secretary of State

() Change () Addition

Entity Name: BOLLETTIERI SPORTS MEDICINE CENTER LIMITED LIABILITY COMPANY

Current Principal Place of Business: New Principal Place of Business: C/O BOLLETTIERI TENNIS AND SPORTS ACADEMY. INC. 5500 34TH STREET WEST BRADENTON, FL 34210 **Current Mailing Address: New Mailing Address: BOLLETTIERI SPORTS MEDICINE CENTER** 2828 TAMIAMI TRAIL SARASOTA, FL 34239 FEI Number: 59-3430847 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete BOLLETTIERI TENNIS &, SPORTS ACADEM Y, INC. Name: Name: Address: 5500 34TH STREET, WEST Address: City-St-Zip: BRADENTON, FL 34210 City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

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: WILLIAM MCCOMB MGRM 01/09/2006