

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002112

FILED
Jan 04, 2005
Secretary of State

Entity Name: EMERGENCY MEDICAL ASSOCIATES OF FLORIDA, L.L.C.

Current Principal Place of Business:

1099 5TH AVE N
340
ST. PETERSBURG, FL 33705

New Principal Place of Business:

500 9TH STREET NORTH
303
ST. PETERSBURG, FL 33705

Current Mailing Address:

1099 5TH AVE N
340
ST. PETERSBURG, FL 33705

New Mailing Address:

500 9TH STREET NORTH
303
ST. PETERSBURG, FL 33705

FEI Number: 59-3537604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, DENNIS
1099 5TH AVE N
340
ST. PETERSBURG, FL 33705 US

Name and Address of New Registered Agent:

HERNANDEZ, DENNIS
500 9TH STREET NORTH
SUITE 303
ST. PETERSBURG, FL 33705 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: DENNIS HERNANDEZ, MD

01/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BAYSIDE EMERGENCY PH, YSICIANS, P.A.
Address: 1099 5TH AVE N, #340
City-St-Zip: ST. PETERSBURG, FL 33705

Title: MGRP () Delete
Name: EMERGENCY MEDICAL AS, SOCIATES OF TA M PA BAY
Address: 2727 MARTIN LUTHER KING BLVD., #300
City-St-Zip: TAMPA, FL 33607

Title: MGRM () Delete
Name: EMERGENCY PHYSICIANS, OF ST. PETERS B URG P.A
Address: 603 7TH ST. S., SUITE 360
City-St-Zip: ST. PETERSBURG, FL 33701

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BAYSIDE EMERGENCY PH, YSICIANS, P.A.
Address: 500 9TH STREET NORTH SUITE 303
City-St-Zip: ST. PETERSBURG, FL 33705

Title: MGRM (X) Change () Addition
Name: EMERGENCY MEDICAL AS, SOCIATES OF TA M PA BAY
Address: 2727 MARTIN LUTHER KING BLVD., #300
City-St-Zip: TAMPA, FL 33607

Title: () Change () Addition
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 Section 119.07(3)(i), 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: DENNIS HERNANDEZ, EXECUTIVE DIRECTOR

MGR

01/04/2005

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