

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000003173

FILED
Jan 05, 2006
Secretary of State

Entity Name: TAMPA BAY NEPHROLOGY ASSOCIATES, P.L.

Current Principal Place of Business:

4705 N. ARMENIA, SUITE A
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

4705 N. ARMENIA, SUITE A
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-3546330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, GERMAN MD
4705 N. ARMENIA AVENUE
STE A
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

RAMIREZ, GERMAN M.D.
4705 N. ARMENIA AVENUE
SUITE A
TAMPA, FL 33603 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: GERMAN RAMIREZ, M.D.

01/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAMIREZ, GERMAN
Address: 4705 N. ARMENIA, SUITE A
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RAMIREZ, GERMAN M.D.
Address: 4705 N. ARMENIA, SUITE A
City-St-Zip: TAMPA, FL 33603

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: GERMAN RAMIREZ, M.D.

MGR

01/05/2006

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