# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**May 31, 2006**
**Secretary of State**

DOCUMENT# L99000002633

**Entity Name:** BREVARD COMMUNITY PATHOLOGY SERVICES L.L.C.

**Current Principal Place of Business:**

500 N. WASHINGTON AVE., #101
TITUSVILLE, FL 32796

**New Principal Place of Business:**

**Current Mailing Address:**

500 N. WASHINGTON AVE., #101
TITUSVILLE, FL 32796

**New Mailing Address:**

**FEI Number: 59-3581947** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**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:**

VYAS, SANJIV
14420 SALINGER RD
ORLANDO, FL 32828 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: | MGRM | ( ) Delete |
| Name: | VYAS, SANJIV | |
| Address: | 14420 SALINGER RD | |
| City-St-Zip: | ORLANDO, FL 32828 | |
| Title: | MGRM | ( ) Delete |
| Name: | VYAS, NIMISHA | |
| Address: | 14420 SALINGER RD | |
| City-St-Zip: | ORLANDO, FL 32828 | |
| Title: | MGRM | ( ) Delete |
| Name: | VARMA, SUDHIR | |
| Address: | 1670 SOUTH PARK AVENUE | |
| City-St-Zip: | TITUSVILLE, FL 32780 | |

**ADDITIONS/CHANGES:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| 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 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: SANJIV VYAS PART 05/31/2006

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