

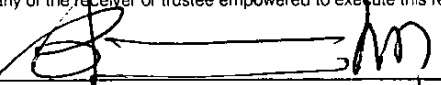


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State

03-17-2006 90029 005 ****50.00

DOCUMENT # L99000004091 1. Entity Name HIDDEN HARBOR GROUP, L.L.C.					
Principal Place of Business 5121 HIDDEN HARBOR ROAD SARASOTA, FL 34242			Mailing Address 5121 HIDDEN HARBOR ROAD SARASOTA, FL 34242		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02162006 Chg-LLC CR2E083 (11/05)	
4. FEI Number 65-0933675				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
THOMISON, JAMES E 1515 RINGLING BLVD., SUITE 800 SARASOTA, FL 34236			Name Street Address (P.O. Box Number is Not Acceptable) 1800 SECOND STREET, SUITE 808 City SARASOTA FL Zip Code 34236		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MASTERTSON, SUSAN S 5121 HIDDEN HARBOR ROAD SARASOTA, FL 34242	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MASTERTSON, BYRON J 5121 HIDDEN HARBOR ROAD SARASOTA, FL 34242	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Susan S. Mastertson, M.D.					
Date 2/24/06				Daytime Phone # 941-364-8787	

ATTACHMENT # L99000004091
20017272
WALTERS
LEVINE
KLINGENSMITH
& THOMISON P.A.
ATTORNEYS AT LAW
SARASOTA • TAMPA

JAMES E. THOMISON
Board Certified Health Law Attorney
jthomison@walterslevine.com
www.walterslevine.com

SOUTHTRUST BANK BUILDING
1800 SECOND STREET
SUITE 808
SARASOTA, FL 34236
(941) 364-8787
(941) 361-3023 FAX

March 8, 2006

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

RE: Hidden Harbor Group, LLC
2006 Limited Liability Company Annual Report
Our File No. 99078-001

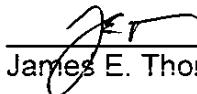
Dear Sir/Madam:

Enclosed please find the 2006 Limited Liability Company Annual Report for filing, along with a check in the amount of \$50.00 representing the filing fee.

Thank you for your attention to this matter.

Very truly yours,

WALTERS LEVINE
KLINGENSMITH & THOMISON, P.A.


James E. Thomison

JET/dkr
Enclosures
99078-001/Division of Corp ltr