

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004546

FILED  
Apr 22, 2005  
Secretary of State

Entity Name: FLORIDA PEDIATRIC ASSOCIATES, LLC

## Current Principal Place of Business:

880 SIXTH STREET SOUTH  
SUITE 110  
ST PETERSBURG, FL 33701

## New Principal Place of Business:

1033 9TH ST N  
SUITE 108  
ST PETERSBURG, FL 33701

## Current Mailing Address:

880 SIXTH STREET SOUTH  
SUITE 110  
ST PETERSBURG, FL 33701

## New Mailing Address:

1033 9TH ST N  
SUITE 108  
ST PETERSBURG, FL 33701

FEI Number: 59-3490927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALTIEL, ALBERT  
880 SIXTH STREET SOUTH  
SUITE 110  
ST PETERSBURG, FL 33701 US

## Name and Address of New Registered Agent:

SALTIEL, ALBERT  
1033 9TH ST N, SUITE 108  
ST PETERSBURG, FL 33701 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:

04/22/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: FLORIDA PEDIATRIC RA, DIOLOGY, P.A.  
Address: 880 SIXTH STREET SOUTH SUITE 110  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGRM ( ) Delete  
Name: M. W. MORRIS, M.D., INC.  
Address: 1800 NINTH STREET NORTH  
City-St-Zip: ST PETERSBURG, FL 33704

Title: MGRM ( ) Delete  
Name: ANESTHESIA CARE EXPE, RTS  
Address: 880 SIXTH STREET SOUTH, #110  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGRM ( ) Delete  
Name: INTENSIVE CARE SERVI, CES ASSOCIATES , PA  
Address: 880 SIXTH STREET SOUTH, #370  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGR (X) Delete  
Name: SALTIEL, ALBERT MD  
Address: 880 SIXTH STREET SOUTH #110  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGR (X) Delete  
Name: VU, DIEN MD  
Address: 880 SIXTH STREET SOUTH #110  
City-St-Zip: ST PETERSBURG, FL 33701

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FLORIDA PEDIATRIC RA, DIOLOGY, P.A.  
Address: 1033 9TH ST N, SUITE 108  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGRM (X) Change ( ) Addition  
Name: M. W. MORRIS, M.D., INC.  
Address: 1800 NINTH STREET NORTH  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGRM (X) Change ( ) Addition  
Name: ANESTHESIA CARE EXPE, RTS  
Address: 1033 9TH ST N, SUITE 108  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGRM (X) Change ( ) Addition  
Name: INTENSIVE CARE SERVI, CES ASSOCIATES , PA  
Address: 880 SIXTH STREET S, SUITE 370  
City-St-Zip: ST PETERSBURG, FL 33701

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 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: ALBERT SALTIEL, MD

MGR

04/22/2005

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