

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000009206

FILED
Apr 28, 2003
Secretary of State

Entity Name: TELEMEDICINE RESOURCE GROUP, L.L.C.

Current Principal Place of Business:

1950 NORTHWESTERN AVE., #106
STILLWATER, MN 55082

New Principal Place of Business:

11200 STILLWATER BOULEVARD
107
LAKE ELMO, MN 55042

Current Mailing Address:

1950 NORTHWESTERN AVE., #106
STILLWATER, MN 55082

New Mailing Address:

11200 STILLWATER BOULEVARD
107
LAKE ELMO, MN 55042

FEI Number: 41-1998362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, THOMAS J JR.
150 ALHAMBRA CIRCLE, SUITE 1260
CORAL GABLES, FL 33134 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/MEMBERS:

Title: MGR () Delete
Name: ROLLIE, BRUCE E
Address: 1950 NORTHWESTERN AVE., #106
City-St-Zip: STILLWATER, MN 55082

Title: MEM (X) Delete
Name: ANDERSON, FRED
Address: 1401 KIMDELE ST.
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES:

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: BRUCE E ROLLIE

MGR

04/28/2003

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