

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000446

FILED
Jul 26, 2004
Secretary of State

Entity Name: UNITED MEDICAL SOLUTIONS, LLC

Current Principal Place of Business:

550 REO STREET, SUITE 103
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

550 REO STREET, SUITE 103
TAMPA, FL 33609

New Mailing Address:

FEI Number: 76-0721981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVIA, ROBERT
550 RED ST. SUITE 201A
TAMPA, FL 33609 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: DELUZIO, VINCENT C MANAGER
Address: 113 TECHNOLOGY DRIVE
City-St-Zip: PITTSBURGH, PA 15275 US

Title: MGR () Change (X) Addition
Name: MURPHY, THOMAS C MANAGER
Address: 113 TECHNOLOGY DRIVE
City-St-Zip: PITTSBURGH, PA 15275 US

Title: MGR () Change (X) Addition
Name: APERFINE, JOSEPH P MANAGER
Address: 113 TECHNOLOGY DRIVE
City-St-Zip: PITTSBURGH, PA 15275 US

Title: MGR () Change (X) Addition
Name: SALVIA, ROBERT MANAGER
Address: 113 TECHNOLOGY DRIVE
City-St-Zip: PITTSBURGH, PA 15275 US

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: JOSEPH P. APERFINE

MGR

07/26/2004

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