

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004296

FILED
Jun 05, 2007
Secretary of State

Entity Name: SUMMIT MEDICAL PROPERTY, LLC

Current Principal Place of Business:

3100 NORTHWESTERN HWY
SUITE 220
FARMINGTON, MI 48334

New Principal Place of Business:

31000 NORTHWESTERN HWY
SUITE 220
FARMINGTON HILLS, MI 48334

Current Mailing Address:

3100 NORTHWESTERN HWY
SUITE 220
FARMINGTON, MI 48334

New Mailing Address:

31000 NORTHWESTERN HWY
SUITE 220
FARMINGTON HILLS, MI 48334

FEI Number: 74-3130683 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:

Name and Address of New Registered Agent:

BRASHER, JOHN
8801 RIVER CROSSING BOULEVARD
NEW PORT RICHEY, FL 34655 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: RUBIN, DAVID C
Address: 31000 NORTHWESTERN HWY SUITE 220
City-St-Zip: FARMINGTON HILLS, MI 48334

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID C RUBIN

MGR

06/05/2007

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