2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

08-31-2006 90002 043 ****61.25
N05000005689

FILED
06 SEP 11 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05000005689

1. Entity Name
LEE MEMORIAL MEDICAL MANAGEMENT, INC.

Principal Place of Business	Mailing Address
2776 CLEVELAND AVE FT. MYERS, FL 33901	2776 CLEVELAND AVE FT. MYERS, FL 33901

07102006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2559835 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCCURDY, ROBERT C 2776 CLEVELAND AVE SUITE 459 FT. MYERS, FL 33901	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 Mary A. McCurdy 8-24-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DONALDSON, JOHN D 3487 BROADWAY FT. MYERS, FL 33901	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STOUT, MARILYN 2907 SW 29TH AVE CAPE CORAL, FL 33914	☐ Delete	T MARILYN STOUT 2907 SW 29th Ave CAPE CORAL FL 33914	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ENGLISH, JAMES J REV 1255 FLORIDA AVE FT. MYERS, FL 33901	☐ Delete	VC Rev JAMES ENGLISH 1255 Florida Ave Ft Myers Fl 33901	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCGOVERN, NANCY RN 785 SOUTH ENTRADA DR FT. MYERS, FL 33919	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRETT, LOIS 8701 ESTERO BLVD, NO. 607 FT. MYERS, FL 33931	☐ Delete	S LOIS BARRETT 8701 ESTERO BLVD # 607 Ft Myers Fl 33931	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN, LINDA L ARNP 11698 POINTE CIR FT. MYERS, FL 33908	☐ Delete	C LINDA BROWN ARNP 14890 Strike Way Ft Myers Fl 33908	☒ Change ☐ Addition

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [illegible] 8/18/06 239-985-3502
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

LBrownARNP