

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095528

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: LTR MEDICAL MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

5737 BARNHILL DRIVE  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

3101 UNIVERSITY BLVD. SOUTH  
SUITE 100  
JACKSONVILLE, FL 32216

## Current Mailing Address:

5737 BARNHILL DRIVE  
JACKSONVILLE, FL 32207

## New Mailing Address:

3101 UNIVERSITY BLVD. SOUTH  
SUITE 100  
JACKSONVILLE, FL 32216

FEI Number: 80-0075358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRASER, THOMAS J JR ESQ  
240 PONTE VEDRA PARK DRIVE STE 150  
PONTE VEDRA BEACH, FL 32082 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WALLACH, LARRY  
Address: 61 SEAWAVE ROAD  
City-St-Zip: EAST ROCKAWAY, NY 11518

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WALLACH, LARRY  
Address: 61 SEAWANE ROAD  
City-St-Zip: EAST ROCKAWAY, NY 11518

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 or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY WALLACH

D

04/28/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date