

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062374

FILED  
Apr 24, 2011  
Secretary of State

**Entity Name:** BOYNTON BEACH MEDICAL CENTER LLC

**Current Principal Place of Business:**

10151 ENTERPRISE CENTER BLVD., STE. 110  
BOYNTON BEACH, FL 33437

**New Principal Place of Business:**

**Current Mailing Address:**

10151 ENTERPRISE CENTER BLVD., STE. 110  
BOYNTON BEACH, FL 33437

**New Mailing Address:**

FEI Number: 20-3045691

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WIENER, MARLYN J ESQ.  
6111 BROKEN SOUND PARKWAY NW, STE. 330  
BOCA RATON, FL 33487 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/MANAGERS:**

Title: MGR  
Name: BRESKY, KENNETH  
Address: 10151 ENTERPRISE CENTER BLVD., STE. 108  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR  
Name: FELKER, DAVID  
Address: 10151 ENTERPRISE CENTER BLVD., STE. 209  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR  
Name: RUBIN, STUART  
Address: 10151 ENTERPRISE CENTER BLVD., STE. 107  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR  
Name: IJAC, DAVID  
Address: 10151 ENTERPRISE CENTER BLVD., STE 101  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR  
Name: HELLMAN, DAVID  
Address: 10151 ENTERPRISE CENTER BLVD., STE. 103  
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby 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: KENNETH BRESKY

MGR

04/24/2011

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