

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097786

FILED
Apr 04, 2010
Secretary of State

Entity Name: WEST BOYNTON MEDICAL CENTER, LLC

Current Principal Place of Business:

2015 OCEAN DRIVE
SUITE 8
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

2015 OCEAN DRIVE
SUITE 8
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 59-3825847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDREW, FEIN K ESQ
C/O BLOCH, MINERLEY & FEIN, PL
980 N. FEDERAL HIGHWAY, SUITE 412
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

ANDREW, FEIN K ESQ
C/O MINERLEY & FEIN, PL
980 N. FEDERAL HIGHWAY, SUITE 412
BOCA RATON, FL 33432 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

04/04/2010

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SPEIZMAN, DAVID
Address: 2393 N.W. 64TH STREET
City-St-Zip: BOCA RATON, FL 33496

Title: MGR
Name: JACOB, MARTY
Address: 22170 HOLLYHOCK TRAIL
City-St-Zip: BOCA RATON, FL 33433

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: MARTY JACOB

MGR

04/04/2010

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