

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008603

FILED
Apr 13, 2009
Secretary of State

Entity Name: LAKEWOOD RANCH NEUROLOGY, L.L.C.

Current Principal Place of Business:

8330 LAKEWOOD RANCH BLVD.
BRADENTON, FL 34202

New Principal Place of Business:

8330 LAKEWOOD RANCH BLVD.
BRADENTON, FL 34202 US

Current Mailing Address:

UHS OF DELAWARE, INC.
367 S. GULPH ROAD
KING OF PRUSSIA, PA 19406

New Mailing Address:

UHS OF DELAWARE, INC.
367 S. GULPH ROAD
KING OF PRUSSIA, PA 19406 US

FEI Number: 26-1850133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: MANATEE MEMORIAL HOSPITAL, L.P.
Address: 206 SECOND STREET EAST
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MANATEE MEMORIAL HOSPITAL, L.P.
Address: 367 S. GULPH ROAD
City-St-Zip: KING OF PRUSSIA, PA 19406 US

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: GEORGE H. BRUNNER JR.

MGRM

04/13/2009

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