2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042597

Entity Name: HEALTHPOINT WALK-IN CARE, LLC

FILED Apr 27, 2009 Secretary of State

Date

Current Principal Place of Business:	New Principal Place of Business:	
4902 EISENHOWER BLVD. TAMPA, FL 33634		
Current Mailing Address:	New Mailing Address:	
4902 EISENHOWER BLVD. TAMPA, FL 33634		
FEI Number: 26-2603042 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
MALLAH, ISAAC 4902 EISENHOWER BLVD. TAMPA, FL 33634 US	MALLAH, ISAAC 4902 EISENHOWER BLVD., STE 300 TAMPA, FL 33634 US	
The above named entity submits this statement for the pin the State of Florida.	ourpose of changing its registered office or registered agent, or b	oth
SIGNATURE:	04/27/2009	

MANAGING MEMBERS/MANAGERS:

Title: () Delete Title: MGRM () Change (X) Addition Name: HEALTHPOINT MEDICAL GROUP, INC. Address: Address: 4902 EISENHOWER BLVD., STE 300 City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

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: LEE KIRKMAN, MD P 04/27/2009