

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000086915

FILED
Mar 19, 2012
Secretary of State

Entity Name: NORTH SHORE MEDICAL BILLING CENTER, L.L.C.

Current Principal Place of Business:

1445 ROSS AVENUE SUITE 1400
DALLAS, TX 75202

New Principal Place of Business:

Current Mailing Address:

1445 ROSS AVENUE SUITE 1400
DALLAS, TX 75202

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

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
Name: TENET HEALTHSYSTEM NORTH SHORE, INC.
Address: 1445 ROSS AVENUE SUITE 1400
City-St-Zip: DALLAS, TX 75202 US

Title: MGR
Name: KRISTINA, MACK
Address: 1445 ROSS AVENUE SUITE 1400
City-St-Zip: DALLAS, TX 75202 US

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: KRISTINA MACK, SOLE DIR

MGR

03/19/2012

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