

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013625

FILED  
Jan 21, 2008  
Secretary of State

**Entity Name:** TOWN & COUNTRY EMERGENCY PHYSICIANS, LLC

**Current Principal Place of Business:**

3107 STIRLING ROAD, SUITE #101  
FT LAUDERDALE, FL 33312

**New Principal Place of Business:**

3107 STIRLING ROAD, SUITE #300  
FT LAUDERDALE, FL 33312

**Current Mailing Address:**

3107 STIRLING ROAD, SUITE #101  
FT LAUDERDALE, FL 33312

**New Mailing Address:**

3107 STIRLING ROAD, SUITE #300  
FT LAUDERDALE, FL 33312

**FEI Number:** 01-0691275

**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: SCHILLINGER, JEFFREY  
Address: 3107 STIRLING ROAD, SUITE 101  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: MGRM ( ) Delete  
Name: SCHILLINGER, DAVID  
Address: 3107 STIRLING ROAD, SUITE 101  
City-St-Zip: FT LAUDERDALE, FL 33312

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SCHILLINGER, JEFFREY  
Address: 3107 STIRLING ROAD, SUITE 300  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: MGRM (X) Change ( ) Addition  
Name: SCHILLINGER, DAVID  
Address: 3107 STIRLING ROAD, SUITE 300  
City-St-Zip: FT LAUDERDALE, FL 33312

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:** SUSAN GRECO

SEC

01/21/2008

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