

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002655

FILED
Mar 30, 2010
Secretary of State

Entity Name: WOMEN'S CONTEMPORARY HEALTH CENTER, PLLC

Current Principal Place of Business:

6150 DIAMOND CENTER CT., BLDG #400
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

6150 DIAMOND CENTER COURT, BLDG # 400
MAILBOX # 401
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 65-1002455 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLOY, RICHARD L
6150 DIAMOND CENTER CT., BLDG #400
FORT MYERS, FL 33912 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: BLOY, RICHARD L
Address: 6150 DIAMOND CENTER CT., BLDG #400
City-St-Zip: FORT MYERS, FL 33912

Title: CFO
Name: MARTIN, RONALD
Address: 6150 DIAMOND CENTER CT., BLDG #400
City-St-Zip: FORT MYERS, FL 33912

Title: COO
Name: BLOY, PETER
Address: 6150 DIAMOND CENTER CT., BLDG #400
City-St-Zip: FORT MYERS, FL 33912

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: RICHARD L BLOY

MGRM

03/30/2010

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