2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2010
Secretary of State

DOCUMENT# L00000009042

Entity Name: HEART CENTER OF THE TREASURE COAST, LLC

Current Principal Place of Business:

330 17TH STREET
SUITE E
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

330 17TH STREET
SUITE E
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-1077388 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANCILIA, JOHN R
1795 WEST NASA BLVD
MELBOURNE, FL 32901 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: CELANO, CHARLES MD
Address: 3607 15TH AVENUE
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM
Name: ANDERSON, JANET MD
Address: 3745 11TH CIRCLE
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM
Name: SHADANI, ABDUL M.D.
Address: 2215 NEBRASKA AVENUE STE 1B2
City-St-Zip: FORT PIERCE, FL 34950

Title: MGRM
Name: HENDLEY, ROBERT (III) M.D.
Address: 1300 36TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM
Name: SHAREEF, BABAR M.D.
Address: 2215 NEBRASKA AVENUE SUITE 2E
City-St-Zip: FORT PIERCE, FL 34950

Title: MGRM
Name: RASHID, AHMAD M.D.
Address: 2215 NEBRASKA AVENUE SUITE 2E
City-St-Zip: FORT PIERCE, FL 34950

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 Statues.

SIGNATURE: CHARLES CELANO MCRM 03/26/2010

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