2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2010
Secretary of State

DOCUMENT# L00000013072

Entity Name: FLORIDA HEART AND VASCULAR ASSOCIATES, P.L.

Current Principal Place of Business:

3000 MEDICAL PARK DRIVE
SUITE 500
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

3000 MEDICAL PARK DRIVE
SUITE 500
TAMPA, FL 33613 US

New Mailing Address:

FEI Number: 59-3680877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AYLWARD, ROBERT E
600 S. MAGNOLIA AVE., STE. 100
TAMPA, FL 33606 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: KLEIN, KEVIN L D.O.P.A
Address: 3000 MEDICAL PARK DR., SUITE 500
City-St-Zip: TAMPA, FL 33613

Title: MGRM
Name: SMITH, JAMES O M.D.P.A
Address: 3000 MEDICAL PARK DR., SUITE 500
City-St-Zip: TAMPA, FL 33613

Title: MGRM
Name: PASCUAL, EDUARDO E M.D.P.A
Address: 13606 WATERFALL WAY
City-St-Zip: TAMPA, FL 33624

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: KEVIN L KLEIN PRES 02/14/2010

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