

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000014700

FILED
Jan 04, 2011
Secretary of State

Entity Name: CMS HEALTHCARE OF NEW YORK, LLC

Current Principal Place of Business:

10008 N. DALE MABRY HWY., STE. 214
TAMPA, FL 33618

New Principal Place of Business:

10008 N. DALE MABRY HIGHWAY
SUITE 214
TAMPA, FL 33618

Current Mailing Address:

10008 N. DALE MABRY HWY., STE. 214
TAMPA, FL 33618

New Mailing Address:

10008 N. DALE MABRY HIGHWAY
SUITE 214
TAMPA, FL 33618

FEI Number: 59-3685798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TONEY, SAM D M.D.
10008 N. DALE MABRY HWY., STE. 214
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

TONEY, SAM D M.D.
10008 N. DALE MABRY HIGHWAY
SUITE 214
TAMPA, FL 33618 US

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: SAM D. TONEY

01/04/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: TONEY, SAM D MD
Address: 10008 N. DALE MABRY HIGHWAY, SUITE 214
City-St-Zip: TAMPA, FL 33618

Title: MGRM
Name: PADDA, SHAN S
Address: 10008 N. DALE MABRY HIGHWAY, SUITE 214
City-St-Zip: TAMPA, FL 33618

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: SAM D. TONEY

MGRM

01/04/2011

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