

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006543

FILED
Apr 27, 2010
Secretary of State

Entity Name: EAST COAST HOSPITAL INPATIENT SPECIALISTS, P.L.C.

Current Principal Place of Business:

2500 WEST LAKE MARY BLVD
SUITE 101
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 953457
LAKE MARY, FL 327953457

New Mailing Address:

FEI Number: 59-3714564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

IBNE-RASA, HASIB M MGR
2500 W LAKE MARY BLVD
SUITE 101
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

IBNE-RASA, HASIB A MGR
2500 W LAKE MARY BLVD
SUITE 101
LAKE MARY, FL 32746 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: HASIB IBNE-RASA

04/27/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MIRZA, ASIF MD
Address: 1629 ROCKDALE LOOP
City-St-Zip: HEATHROW, FL 32746

Title: MGR
Name: IBNE-RASA, HASIB MD
Address: 5260 SHORELINE CIR
City-St-Zip: SANFORD, FL 32771

Title: MGR
Name: AHMAD, FAISAL
Address: 1590 CHERRY LAKE WAY
City-St-Zip: HEATHROW, FL 32746

Title: MGR
Name: HASAN, SYED A
Address: 4969 MAPLE GLEN DRIVE
City-St-Zip: SANFORD, FL 32771

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: HASIB IBNE-RASA

MGR

04/27/2010

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