2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013126

Entity Name: GOLD COAST EKG CONSULTANTS, L.L.C.

FILED Mar 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

200 KNUTH ROAD, SUITE 200 200 KNUTH ROAD

BOYNTON BEACH, FL 33436 SUITE 200

BOYNTON BEACH, FL 33436 US

Current Mailing Address: New Mailing Address:

200 KNUTH ROAD, SUITE 200 200 KNUTH ROAD

BOYNTON BEACH, FL 33436 SUITE 200

BOYNTON BEACH, FL 33436 US

FEI Number: 65-1145436 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

NICHOLS, L. WESLEY NICHOLS, L. WESLEY

11380 PROSPERITY FARMS ROAD 11380 PROSPERITY FARMS ROAD, SUITE 204

PALM BEACH GARDENS, FL 33410 SUITE 204 PALM BEACH GARDENS, FL 33410 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: 03/21/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition

MEYER, KEITH D MD MEYER, KEITH D MD Name: Name: 1411 N FLAGLER DR, SUTIE 9500 Address: 1411 N FLAGLER DR, SUITE 9500 Address:

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401 US

(X) Change () Addition Title: () Delete Title: Name: FEISTMAN, THOMAS Name: FEISTMAN, THOMAS

Address: 5405 OKEECHOBEE BLVD STE 306 Address: 5405 OKEECHOBEE BLVD. SUITE 306

City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: () Delete Title: (X) Change () Addition KACHEL, RICHARD G MD KACHEL, RICHARD G MD Name: Name: 1401 FORUM WAY, SUITE 300 1401 FORUM WAY, SUITE 300 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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.

PRES SIGNATURE: KEITH D MEYER, MD 03/21/2009