

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016198

FILED
Feb 13, 2011
Secretary of State

Entity Name: JOHN YOUNG FAMILY MEDICAL CENTER, LLC

Current Principal Place of Business:

5308 SOUTH JOHN YOUNG PARKWAY
SUITE 200
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

5308 SOUTH JOHN YOUNG PARKWAY
SUITE#200
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 01-0670885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, RAZA
5308 SOUTH JOHN YOUNG PARKWAY STE 200
SUITE 200
ORLANDO, FL 32839 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: D
Name: ALI, RAZA
Address: 5308 SOUTH JOHN YOUNG PARKWAY, STE 200
City-St-Zip: ORLANDO, FL 32839

Title: MGRM
Name: KHAN, JASEEM
Address: 5308 SOUTH JOHN YOUNG PARKWAY STE 200
City-St-Zip: ORLANDO, FL 32839

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: RAZA ALI

D

02/13/2011

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