

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018779

FILED
Feb 20, 2012
Secretary of State

Entity Name: PALM COAST MEDICAL SPECIALISTS, L.L.C.

Current Principal Place of Business:

21 HOSPITAL DRIVE
200
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

595 WEST GRANADA BLVD.
A
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 33-1024372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, STEVEN J
3 PINE CONE DR STE 106
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

BROWN, STEVEN J
21 HOSPITAL DRIVE
SUITE 270
PALM COAST, FL 32164 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:

02/20/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ALTER, DENNIS T
Address: 6 INDIAN MOUND COURT
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM
Name: BROWN, STEVEN J
Address: 39 OLD BRIDGE WAY
City-St-Zip: ORMOND BEACH, FL 32174

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: DENNIS T. ALTER

MGRM

02/20/2012

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