

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000023158

**FILED  
Feb 13, 2010  
Secretary of State**

**Entity Name:** HILLSBORO MEDICAL PLAZA, LLC

**Current Principal Place of Business:**

2749 NE 26 AVE  
LIGHTHOUSE POINT, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

2749 NE 26 AVE  
LIGHTHOUSE POINT, FL 33064

**New Mailing Address:**

**FEI Number:** 51-0436566      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SUSSMAN, JEFFREY E  
2749 NE 26 AVE  
LIGHTHOUSE POINT, FL 33064      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: MGR  
Name: SUSSMAN, JEFFREY  
Address: 2749 NE 26 AVE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGR  
Name: SUSSMAN, SHERRY  
Address: 2749 NE 26 AVE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: JEFFREY SUSSMAN      MGR      02/13/2010

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