

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029173

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: PRIMECARE AT TWIN LAKES, LLC

**Current Principal Place of Business:**

1890 LPGA BLVD  
SUITE 130  
DAYTONA BEACH, FL 32117

**New Principal Place of Business:**

**Current Mailing Address:**

1890 LPGA BLVD  
SUITE 130  
DAYTONA BEACH, FL 32117

**New Mailing Address:**

FEI Number: 45-0527284      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GRIGG, J. CAROL  
1890 LPGA BLVD., SUITE 130  
DAYTONA BEACH, FL 32117      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: MGRM      ( ) Delete  
Name: GRIGG, CAROL  
Address: 4167 SANORA LANE  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JOHNSIE CAROL GRIGG, M.D.

MGRM

04/23/2009

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