

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000790

FILED
Feb 02, 2011
Secretary of State

Entity Name: ALPHA PHYSICIAN SERVICES, LLC

Current Principal Place of Business:

10150 HIGHLAND MANOR DRIVE
SUITE 300
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

10150 HIGHLAND MANOR DRIVE
SUITE 300
TAMPA, FL 33610

New Mailing Address:

FEI Number: 74-3074788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID J. POWERS, P.A.
7777 GLADES ROAD, SUITE 300
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

DAN DIAS, P.A.
5102 WEST LAUREL STREET
SUITE 700
TAMPA, FL 33607 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: DAN DIAS

02/02/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: REGAL MANAGEMENT IV, LLC
Address: 10150 HIGHLAND MANOR DRIVE #300
City-St-Zip: TAMPA, FL 33610

Title: MGRM
Name: REGAL MANAGEMENT III, LLC
Address: 10150 HIGHLAND MANOR DRIVE #300
City-St-Zip: TAMPA, FL 33610

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: MARILYN WOOD

MGRM

02/02/2011

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