2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 17, 2010
Secretary of State

DOCUMENT# L03000028944

Entity Name: PHILLIPS MEDICAL CENTER, LLC

Current Principal Place of Business:

4248 TOWN CENTER BLVD.
SUITE 4
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

4248 TOWN CENTER BLVD.
SUITE 4
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 06-1703662 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALPER, JONATHAN B ESQ.
274 KIPLING COURT
HEATHROW, FL 32746 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: PHILLIPS, DACIANA
Address: 4248 TOWN CENTER BLVD.STE 4
City-St-Zip: ORLANDO, FL 32837

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 Statues.

SIGNATURE: PHILLIPS MGR 02/17/2010

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