

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038670

FILED
Apr 23, 2010
Secretary of State

Entity Name: SYNTRICITY HEALTHCARE SOLUTIONS, LLC

Current Principal Place of Business:

C/O LOUISE T. JEROSLOW, ESQ.
6075 SUNSET DRIVE, SUITE 201
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

C/O LOUISE T. JEROSLOW, ESQ.
6075 SUNSET DRIVE, SUITE 201
MIAMI, FL 33143

New Mailing Address:

FEI Number: 20-0347860 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JEROSLOW, LOUISE T
6075 SUNSET DRIVE
SUITE 201
MIAMI, FL 33143 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
Name: FANNIN, DEBORAH D
Address: 2855 REGAL PINE TRAIL
City-St-Zip: OVIEDO, FL 32766

Title: MGRM
Name: GONZALEZ, MARIA E
Address: 1835 N.E. MIAMI GARDENS DRIVE 167
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: MARIA E. GONZALEZ MM 04/23/2010

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