2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2010
Secretary of State

DOCUMENT# L04000009502

Entity Name: CHIEFLAND MEDICAL CENTER, LLC

Current Principal Place of Business:

1113 NW 23RD AVENUE
CHIEFLAND, FL 32626

New Principal Place of Business:

Current Mailing Address:

1113 NW 23RD AVENUE
CHIEFLAND, FL 32626

New Mailing Address:

5843 COLFAX AVENUE
ALEXANDRIA, VA 22311

FEI Number: 51-0497038 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MINTON, MARIE S
1113 NW 23RD AVENUE
CHIEFLAND, FL 32626 US

Name and Address of New Registered Agent:

MINTON, MARIE S MGRM
1113 NW 23RD AVENUE
C/O CHIEFLAND MEDICAL CENTER, LLC
CHIEFLAND, FL 32626 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: MARIE S. MINTON 02/01/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MINTON, MARIE S
Address: 5843 COLFAX AVE
City-St-Zip: ALEX, VA 22311

Title: MGRM
Name: SCHAEFER, ELIZABETH A
Address: 1229 SPRUCE AVENUE
City-St-Zip: SHADY SIDE, MD 20764

Title: MGR
Name: MINTON, STEPHEN M
Address: 5843 COLFAX AVENUE
City-St-Zip: ALEXANDRIA, VA 22311

Title: MGR
Name: WASHBURN, GREGORY S
Address: 2909 N. 9TH STREET
City-St-Zip: ARLINGTON, VA 22201

Title: MGR
Name: CONNOLE, JOHN L
Address: 2904 CLEARHILL LANE
City-St-Zip: MOUNT AIRY, MD 21771

Title: MGRM
Name: MINTON, MARIE S
Address: 5843 COLFAX AVENUE
City-St-Zip: ALEXANDRIA, VA 22311

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: MARIE S. MINTON MGRM 02/01/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date