

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 05, 2010
Secretary of State

Entity Name: GULF COAST HEALTH SERVICES, LLC

Current Principal Place of Business:

2344 BEE RIDGE ROAD
#103
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

C/O RONNY J. HALPERIN, PA
312 SE 17TH STREET, SECOND FLOOR
FT. LAUDERDALE, FL 33316

New Mailing Address:

2344 BEE RIDGE ROAD
#103
SARASOTA, FL 34239

FEI Number: 20-0967031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONNY J. HALPERIN, PA
312 SE 17TH STREET
SECOND FLOOR
FT. LAUDERDALE, FL 33316 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: JUCEAM, MICHAEL
Address: 4752 SWEET MEADOW CIRCLE
City-St-Zip: SARASOTA, FL 34238

Title: MGR
Name: JUCEAM, ALLISON
Address: 4752 SWEETMEADOW CIRCLE
City-St-Zip: SARASOTA, FL 34238

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: MICHAEL JUCEAM

MGRM

01/05/2010

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