

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083555

FILED
Apr 02, 2008
Secretary of State

Entity Name: AJC HEART PROPERTIES, LLC

Current Principal Place of Business:

12953 PALMS WEST DRIVE
SUITE 102
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

12953 PALMS WEST DRIVE
SUITE 102
LOXAHATCHEE, FL 33470

New Mailing Address:

POST OFFICE BOX 939
LOXAHATCHEE, FL 33470

FEI Number: 20-2560343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRD, BARRY B
7108 FAIRWAY DRIVE
SUITE 225
PALM BEACH GARDENS, FL 33418 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 () Delete
Name: VEDERE, AMARNATH
Address: 12953 PALMS WEST DRIVE SUITE 102
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM () Delete
Name: VENUGOPAL, CHANDRA
Address: 12953 PALMS WEST DRIVE SUITE 102
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM () Delete
Name: FOUCAULD, JEAN
Address: 12953 PALMS WEST DRIVE SUITE 102
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: AMARNATH VEDERE

MGRM

04/02/2008

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