

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088251

FILED
Apr 06, 2009
Secretary of State

Entity Name: COOPERATIVEMED PALM HARBOR, LLC

Current Principal Place of Business:

2702 TAMPA ROAD
PALM HARBOR, FL 34684

New Principal Place of Business:

3165 MCMULLEN BOOOTH RD
UNIT C-1
CLEARWATER, FL 33761

Current Mailing Address:

2702 TAMPA ROAD
PALM HARBOR, FL 34684

New Mailing Address:

3165 MCMULLEN BOOOTH RD
UNIT C-1
CLEARWATER, FL 33761

FEI Number: 71-0983930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NEAL, MICHAL L DO
2702 TAMPA RD
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

O'NEAL, MICHAL L DO
3165 MCMULLEN BOOOTH RD
UNIT C-1
CLEARWATER, FL 33761 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:

04/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MEMBERSHIP MEDICAL M, ANAGEMENT COMP A NY, INC
Address: 2702 TAMPA ROAD
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MEMBERSHIP MEDICAL M, ANAGEMENT COMP A NY, INC
Address: 3165 MCMULLEN BOOOTH RD
City-St-Zip: CLEARWATER, FL 33761

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: MICHAEL O'NEAL, DO

MGR

04/06/2009

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