

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 21, 2009  
Secretary of State**

DOCUMENT# L05000019551

Entity Name: PALM BEACH EMERGENCY MEDICINE ASSOCIATES, P.L.

**Current Principal Place of Business:**

5301 S. CONGRESS AVENUE  
ATLANTIS, FL 33462 US

**New Principal Place of Business:**

**Current Mailing Address:**

5301 S. CONGRESS AVENUE  
ATLANTIS, FL 33462 US

**New Mailing Address:**

FEI Number: 20-2400939      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANTINO, DANA M  
1675 PALM BEACH LAKES BLVD.  
SUITE 700  
WEST PALM BEACH, FL 33041 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: RUMBALL, CASWELL J MD  
Address: 5301 SOUTH CONGRESS AVE  
City-St-Zip: ATLANTIS, FL 33462

Title: MGRM ( ) Delete  
Name: SCHEPPKE, KENNETH A M.D.  
Address: 5301 SOUTH CONGRESS AVE  
City-St-Zip: ATLANTIS, FL 33462

**ADDITIONS/CHANGES:**

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: CASWELL J. RUMBALL, M.D.

MGRM

04/21/2009

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