## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000032638

FILED Feb 18, 2009 Secretary of State

Entity Name: BAPTIST CARDIAC AND VASCULAR INSTITUTE MANAGEMENT COMPANY, LLC

**Current Principal Place of Business: New Principal Place of Business:** 

**EXECUTIVE OFFICES** 8900 NORTH KENDALL DRIVE MIAMI, FL 33176

**Current Mailing Address: New Mailing Address:** 

**EXECUTIVE OFFICES** 8900 NORTH KENDALL DRIVE MIAMI, FL 33176

FEI Number: 20-3316750 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FRIEDMAN, DAVID B ESQ 6855 RED ROAD SUITE 600 CORAL GABLES, FL 33143 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:

Name:

Date

Electronic Signature of Registered Agent

## MANAGING MEMBERS/MANAGERS:

() Delete KATZEN, BARRY T M.D.

8900 NORTH KENDALL DR Address:

City-St-Zip: MIAMI, FL 33176

Title: MGR ( ) Delete QUESADA, RAMON M.D. Name:

Address: 8900 NORTH KENDALL DR City-St-Zip: MIAMI, FL 33176

Title: MGR () Delete

MORENO, NIBERTO L M.D. Name: 8900 NORTH KENDALL DR Address:

City-St-Zip: MIAMI, FL 33176

Title: MGR ( ) Delete Name: RUA, IGNACIO M.D.

8900 NORTH KENDALL DR Address: City-St-Zip: MIAMI, FL 33176

Title: MGR () Delete LIORET, RAMON MD Name:

8900 NORTH KENDALL DR Address: City-St-Zip: MIAMI, FL 33176

Title: () Delete

POWELL, ALEX M.D. Name: Address: 8900 NORTH KENDALL DR

MIAMI, FL 33176 City-St-Zip:

ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition BAPTIST HOSPITAL OF, MIAMI, INC. Name:

Address: 8900 N. KENDALL DRIVE

City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: MGR (X) Change ( ) Addition MORENO, NIBERTO L M.D. Name: 8900 N. KENDALL DRIVE Address:

City-St-Zip: MIAMI, FL 33176

Title: MGR (X) Change ( ) Addition

Name: RUA, IGNACIO M.D. 8900 N. KENDALL DRIVE Address:

City-St-Zip: MIAMI, FL 33176

Title: MGR (X) Change ( ) Addition

LIORET, RAMON MD Name: 8900 N. KENDALL DRIVE Address:

City-St-Zip: MIAMI, FL 33176

Title: (X) Change ( ) Addition

KATZEN, BARRY T M.D. Name: Address: 8900 N. KENDALL DRIVE MIAMI, FL 33176 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: CAROL MASCIOLI 02/18/2009