

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033622

FILED
Apr 07, 2009
Secretary of State

Entity Name: BOYNTON MEDICAL INVESTMENT 1 LLC

Current Principal Place of Business:

1555 PALM BEACH LAKES BLVD #414
WEST PALM BEACH, FL 33401

New Principal Place of Business:

342 PIKE RD
#21
WEST PALM BEACH, FL 33411

Current Mailing Address:

1555 PALM BEACH LAKES BLVD #414
WEST PALM BEACH, FL 33401

New Mailing Address:

342 PIKE RD
#21
WEST PALM BEACH, FL 33411

FEI Number: 20-2706782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEPRIN, WILLIAM
1018 GRAND COURT
BOCA RATON, FL 33487 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: WEPRIN, WILLIAM
Address: 1018 GRAND COURT
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM () Delete
Name: FALK, HARVEY
Address: 316 EAGLE DRIVE
City-St-Zip: JUPITER, FL 33477

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: WILLIAM WEPRIN

MGRM

04/07/2009

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