2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# L05000058092

Entity Name: CUTLER RIDGE MEDICAL CENTER, LLC

Current Principal Place of Business:

10700 CARIBBEAN BLVD.,
SUITE 315
MIAMI, FL 33189

New Principal Place of Business:

Current Mailing Address:

10700 CARIBBEAN BLVD., SUITE 315
MIAMI, FL 33189

New Mailing Address:

FEI Number: 14-1932857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLIAMS, DAMIAN
10700 CARIBBEAN BLVD., SUITE 315
MIAMI, FL 33189 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:	WILLIAMS, MONIQUE	
Address:	10700 CARIBBEAN BLVD., SUITE 315	
City-St-Zip:	MIAMI, FL 33189	
Title:	MGRM	( ) Delete
Name:	WILLIAMS, DAMIAN	
Address:	10700 CARIBBEAN BLVD., SUITE 315	
City-St-Zip:	MIAMI, FL 33189	
Title:	MGRM	( ) Delete
Name:	WILLIAMS, WAYNE M MD	
Address:	10700 CARIBBEAN BLVD., SUITE 315	
City-St-Zip:	MIAMI, FL 33189	

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: DAMIAN WILLIAMS MGRM 05/01/2009

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