2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L05000062366

Entity Name: AMELIA URGENT CARE, LLC

Current Principal Place of Business:

C/O DANIEL J. MATRICIA D.O.
1768 REGATTA DRIVE
FERNANDINA BEACH, FL 320345534

New Principal Place of Business:

Current Mailing Address:

C/O DANIEL J. MATRICIA D.O.
1768 REGATTA DRIVE
FERNANDINA BEACH, FL 320345534

New Mailing Address:

FEI Number: 20-3333281 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATRICIA, SUE M
1768 REGATTA DR
FERNANDINA BEACH, FL 32034 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: MGR ( ) Delete
Name: MATRICIA, DANIEL J D.O.
Address: 1768 REGATTA DRIVE
City-St-Zip: FERNANDINA BEACH, FL 320345534

Title: MGR ( ) Delete
Name: MATRICIA, SUE M
Address: 1768 REGATTA DRIVE
City-St-Zip: FERNANDINA BEACH, FL 320345534

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: DANIEL MATRICIA PRES 04/28/2009

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