2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED

2007 OCT 19 PM 4:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/17/07 01018/010 $ 35.00

10012007 Chg-LLC CR2E083 (12/06)

DOCUMENT # L05000062374

1. Entity Name
BOYNTON BEACH MEDICAL CENTER LLC

Principal Place of Business
1325 SOUTH CONGRESS AVENUE, SUITE 111
BOYNTON BEACH, FL 33426

Mailing Address
1325 SOUTH CONGRESS AVENUE, SUITE 111
BOYNTON BEACH, FL 33426

2. Principal Place of Business - No P.O. Box #
10151 Enterprise Center Blvd

3. Mailing Address
Same

Suite, Apt. #, etc.
Suite 110

Suite, Apt. #, etc.

City & State
Boynton Beach, FL.

City & State

Zip 33437 Country Palm Beach

Zip Country Palm Beach

4. FEI Number
20-3045691

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLD, ROBERT
1325 SOUTH CONGRESS AVENUE, SUITE 111
BOYNTON BEACH, FL 33426

7. Name and Address of New Registered Agent

Name David Felker

Street Address (P.O. Box Number is Not Acceptable)
10151 Enterprise Center Blvd #110

City Boynton Beach FL Zip Code 33437

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ✓ David Felker 10/11/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $50.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	MGR ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	GOLD, ROBERT	NAME	
STREET ADDRESS	1325 SOUTH CONGRESS AVENUE, SUITE 111	STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH, FL 33426	CITY-ST-ZIP	
TITLE	MGR ☒ Delete	TITLE	MGR ☐ Change ☒ Addition
NAME	BASE, JOSEPH N	NAME	Armas, Armando
STREET ADDRESS	6400 CONGRESS AVENUE, SUITE 1400	STREET ADDRESS	10151 Enterprise center Blvd, Ste. 102
CITY-ST-ZIP	BOCA RATON, FL 33487	CITY-ST-ZIP	Boynton Beach, Fl. 33437
TITLE	MGR ☐ Delete	TITLE	MGR ☒ Change ☐ Addition
NAME	FELKER, DAVID	NAME	Felker, David
STREET ADDRESS	6400 CONGRESS AVE SUITE 1400	STREET ADDRESS	10151 Enterprise center Blvd, Ste 207
CITY-ST-ZIP	BOCA RATON, FL 33487	CITY-ST-ZIP	Boynton Beach Fl 33437
TITLE	MGR ☐ Delete	TITLE	MGR ☒ Change ☐ Addition
NAME	FUNT, DAVID S	NAME	Funt, David
STREET ADDRESS	6400 CONGRESS AVE SUITE 1400	STREET ADDRESS	10151 Enterprise Center Blvd, Ste 203
CITY-ST-ZIP	BOCA RATON, FL 33487	CITY-ST-ZIP	Boynton Beach Fl 33437
TITLE	MGR ☐ Delete	TITLE	MGR ☒ Change ☐ Addition
NAME	IJAC, DAVID	NAME	Ijac, David
STREET ADDRESS	6400 CONGRESS AVE SUITE 1400	STREET ADDRESS	10151 Enterprise Center Blvd, Ste. 101
CITY-ST-ZIP	BOCA RATON, FL 33487	CITY-ST-ZIP	Boynton Beach, Fl 33437
TITLE	P ☒ Delete	TITLE	MGR ☐ Change ☒ Addition
NAME	GOLD, ROBERT	NAME	Bresky, Ken
STREET ADDRESS	1325 SOUTH CONGRESS AVENUE, SUITE 111	STREET ADDRESS	10151 Enterprise Center Blvd, Ste. 108
CITY-ST-ZIP	BOYNTON BEACH, FL 33426	CITY-ST-ZIP	Boynton Beach, Fl. 33437

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: ✓ David Felker 10/11/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #