2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 10, 2010
Secretary of State

DOCUMENT# L05000093630

Entity Name: PSL MEDICAL COMPLEX LLC

Current Principal Place of Business:

10377 S. US HIGHWAY 1
STE 104
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

10377 S. US HIGHWAY 1
STE 104
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
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:

CONIDI, FRANCIS
10377 S. US HIGHWAY 1
STE 104
PORT ST. LUCIE, FL 34952 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
Name: CONIDI, FRANCIS
Address: 10377 S. US HIGHWAY 1 SUITE 104
City-St-Zip: PORT ST. LUCIE, FL 34952

I hereby 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 Statues.

SIGNATURE: FRANCIS X CONIDI CEO 05/10/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date