2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2010
Secretary of State

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Entity Name: FAMILY MEDICINE ASSOCIATES OF THE GULF COAST, PLLC

Current Principal Place of Business:

7552 NAVARRE PARKWAY, UNIT 21
NAVARRE, FL 32566 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6479
NAVARRE, FL 32566 US

New Mailing Address:

FEI Number: 11-3688608 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

SVENDSEN, PAMELA J MD
7552 NAVARRE PARKWAY, UNIT 21
NAVARRE, FL 32566 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
Name: SVENDSEN, PAMELA J MD
Address: 7552 NAVARRE PARKWAY, UNIT 21
City-St-Zip: NAVARRE, FL 32566 US

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: PAMELA J. SVENDSEN MGR 05/01/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date