

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005287

Entity Name: TRINITY PHYSICIANS LLC

FILED
Jan 04, 2011
Secretary of State

Current Principal Place of Business:

5818 SR 54
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

2051 LITTLE RD.
NEW PORT RICHEY, FL 34655 US

Current Mailing Address:

5818 SR 54
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

2051 LITTLE RD.
NEW PORT RICHEY, FL 34655 US

FEI Number: 20-4136834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUTTY, MOHAN
7424 COMMUNITY COURT
HUDSON, FL 34667 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: MOHANDAS CHILDREN'S TRUST
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR
Name: KUTTY, MOHAN
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR
Name: MOHAN, MALA
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667 US

Title: MGR
Name: MOHAN, MAYA
Address: 7424 COMMUNITY COURT
City-St-Zip: HUDSON, FL 34667

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 Statutes.

SIGNATURE: MOHAN KUTTY

MGR

01/04/2011

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