

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075748

Entity Name: AMC HOLDINGS, LLC

FILED  
Apr 22, 2008  
Secretary of State

**Current Principal Place of Business:**

1202 N. PARK AVE.  
WINTER PARK, FL 32789

**New Principal Place of Business:**

1202 PARK AVENUE NORTH  
WINTER PARK, FL 32789

**Current Mailing Address:**

1202 N. PARK AVE.  
WINTER PARK, FL 32789

**New Mailing Address:**

1202 PARK AVENUE NORTH  
WINTER PARK, FL 32789

FEI Number: 20-5300259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COHEN, ALAN M M.D.  
1202 N. PARK AVE.  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

COHEN, ALAN M M.D.  
1202 PARK AVENUE NORTH  
WINTER PARK, FL 32789 US

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:

04/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ALAN M. COHEN, M.D., REVOCABLE TRUS T  
Address: 1202 N. PARK AVE.  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ALAN M. COHEN, M.D., REVOCABLE TRUS T  
Address: 1202 PARK AVENUE NORTH  
City-St-Zip: WINTER PARK, FL 32789

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: ALAN COHEN

MGRM

04/22/2008

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