

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086258

FILED
Feb 17, 2010
Secretary of State

Entity Name: GASTROENTEROLOGY CONSULTANTS OF NORTH BROWARD, LLC

Current Principal Place of Business:

7431 NORTH UNIVERSITY DRIVE, SUITE 201
TAMARAC, FL 33321

New Principal Place of Business:

3001 CORAL HILLS DRIVE
SUITE #250
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

7431 NORTH UNIVERSITY DRIVE, SUITE 201
TAMARAC, FL 33321

New Mailing Address:

3001 CORAL HILLS DRIVE
250
CORAL SPRINGS, FL 33065 US

FEI Number: 20-3207949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAMOND, KENNETH L
7431 NORTH UNIVERSITY DRIVE, SUITE 201
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

DIAMOND, KENNETH L
3001 CORAL HILLS DRIVE
250
CORAL SPRINGS, FL 33065 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: KENNETH DIAMOND

02/17/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DIAMOND, KENNETH
Address: 3001 CORAL HILLS DRIVE SUITE #250
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM
Name: ROSS, BARRY
Address: 3001 CORAL HILLS DRIVE SUITE #250
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM
Name: BITMAN, STEWART
Address: 3001 CORAL HILLS DRIVE SUITE #250
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM
Name: ARAI, RONEN
Address: 3001 CORAL HILLS DRIVE SUITE #250
City-St-Zip: CORAL SPRINGS, FL 33065 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 Statutes.

SIGNATURE: KENNETH DIAMOND

MGRM

02/17/2010

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