

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000118112

FILED
Dec 01, 2008
Secretary of State**Entity Name:** BAY HEART GROUP, P.L.**Current Principal Place of Business:**2814 W. VIRGINIA AVE.
TAMPA, FL 33607**New Principal Place of Business:****Current Mailing Address:**2814 W. VIRGINIA AVE.
TAMPA, FL 33607**New Mailing Address:****FEI Number:** 59-3416226**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CFRA, LLC
CORPORATE CENTER THREE AT INTL. PLAZA
4221 W. BOY SCOUT BLVD., SUITE 1000
TAMPA, FL 33607 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:** PRES () Delete
Name: GLOVER, MATTHEW U
Address: 4209 W CULBREATH AVE
City-St-Zip: TAMPA, FL 33609**Title:** D () Delete
Name: IRWIN, JAMES M
Address: 16054 PENWOOD DR
City-St-Zip: TAMPA, FL 33647**Title:** T (X) Delete
Name: PRIDA, XAVIER E
Address: 2626 S DUNDEE BLVD
City-St-Zip: TAMPA, FL 33629**Title:** VP (X) Delete
Name: TOOLE, JOHN C
Address: 4415 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611**Title:** S (X) Delete
Name: GOLDMAN, ANTHONY P
Address: 3304 WESTMORELAND DR
City-St-Zip: TAMPA, FL 33618**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: BAY HEART GROUP MANA, GEMENT, P.A.
Address: 2814 W VIRGINIA AVE
City-St-Zip: TAMPA, FL 33607 US**Title:** MGRM (X) Change () Addition
Name: LORI RUSTERHOLTZ, M., D., P.A.
Address: 808 CHARLES BLVD.
City-St-Zip: OLDSMAR, FL 34677 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: MATTHEW GLOVER, M.D.

PMM

12/01/2008

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