

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000018516

FILED
Apr 01, 2009
Secretary of State

Entity Name: PREMIER URGENT CARE CENTER, LLC

Current Principal Place of Business:

2400 WEST SAMPLE ROAD, SUITE 4
POMPANO BEACH, FL 33073

New Principal Place of Business:

2400 WEST SAMPLE ROAD
SUITE 4
POMPANO BEACH, FL 33073

Current Mailing Address:

2400 WEST SAMPLE ROAD, SUITE 4
POMPANO BEACH, FL 33073

New Mailing Address:

2400 WEST SAMPLE ROAD
SUITE 4
POMPANO BEACH, FL 33073

FEI Number: 20-8471018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RATNER, RYAN S
% BUTZEL LONG, P.C.
SUITE 420, 1200 NORTH FEDERAL HWY
BOCA RATON, FL 33432 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 () Delete
Name: GIBSON, XUNDA
Address: 5106 HERON COURT
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: GIBSON, XUNDA A
Address: 2400 W. SAMPLE ROAD SUITE 4
City-St-Zip: POMPANO BEACH, FL 33073

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: XUNDA A. GIBSON

P

04/01/2009

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