

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067894

FILED
Jan 15, 2009
Secretary of State

Entity Name: TALLAHASSEE CARDIOLOGY HOLDING, LLC

Current Principal Place of Business:

2617 MITCHAM DRIVE, SUITE 102
C/O TALLAHASSEE CARDIOLOGY ASSOCIATES
TALLAHASSEE, FL 32803

New Principal Place of Business:

2631 CENTENNIAL BLVD
SUITE 200
TALLAHASSEE, FL 32308 05

Current Mailing Address:

2617 MITCHAM DRIVE, SUITE 102
C/O TALLAHASSEE CARDIOLOGY ASSOCIATES
TALLAHASSEE, FL 32803

New Mailing Address:

2631 CENTENNIAL BLVD
SUITE 200
TALLAHASSEE, FL 32308 05

FEI Number: 20-4737300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUTCHFIELD, SANDRA K
2617 MITCHAM DRIVE, SUITE 102
TALLAHASSEE, FL 32803 US

Name and Address of New Registered Agent:

CRUTCHFIELD, SANDRA K
2631 CENTENNIAL BLVD
SUITE 200
TALLAHASSEE, FL 32308 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:

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DANIEL BACHTEL AS TE, NANTS BY THE E N TIRETY
Address: 7434 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: MICHELLE D. BACHTEL, TENANT BY THE E N TIRETY
Address: 7434 HEARTLAND CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: JOSEPH C. BAKER AS T, ENANTS BY THE E N TIRETY
Address: 1807 OX BOTTOM LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: NEGHESTY BAKER AS T, ENANTS BY THE E N TIRETY
Address: 1807 OX BOTTOM LANE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHELLE D. BACHTEL

MGRM

01/15/2009

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