

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067997

FILED
Feb 04, 2009
Secretary of State

Entity Name: CORAL GABLES PHYSICIAN SERVICES, L.L.C.

Current Principal Place of Business:

13737 NOEL ROAD, SUITE 100
DALLAS, TX 75240

New Principal Place of Business:

Current Mailing Address:

13737 NOEL ROAD, SUITE 100
DALLAS, TX 75240

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: CGH HOSPITAL, LTD.,
Address: 13737 NOEL ROAD, SUITE 100
City-St-Zip: DALLAS, TX 75240

ADDITIONS/CHANGES:

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: KRISTINA A. MACK

MGR

02/04/2009

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