

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087066

Entity Name: MIDTOWN MEDICAL, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

11911 US HIGHWAY ONE
SUITE 201
NORTH PALM BEACH, FL 33408 US

Current Mailing Address:

11911 US HIGHWAY ONE
SUITE 201
NORTH PALM BEACH, FL 33408 US

FEI Number: 26-0810288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIANCO, JOHN G III
C/O TRIPP SCOTT, P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL 33408 US

New Principal Place of Business:

1044 NORTH US HIGHWAY ONE
SUITE 202
JUPITER, FL 33477 US

New Mailing Address:

1044 NORTH US HIGHWAY ONE
SUITE 202
JUPITER, FL 33477 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: CASH, DAVID F
Address: 11911 US HIGHWAY ONE, SUITE 201
City-St-Zip: NORTH PALM BEACH, FL 33408 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CASH, DAVID F
Address: 1044 NORTH US HIGHWAY ONE, SUITE 202
City-St-Zip: JUPITER, FL 33477 US

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: DAVID CASH

MR

04/29/2009

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