

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105125

FILED
Apr 29, 2011
Secretary of State

Entity Name: M.T. HEALTH CENTER, LLC

Current Principal Place of Business:

1601 BELVEDERE ROAD
206 EAST
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

2979 PGA BLVD.
SUITE 201
PALM BEACH GARDENS, FL 33410 US

Current Mailing Address:

1601 BELVEDERE ROAD
206 EAST
WEST PALM BEACH, FL 33406 US

New Mailing Address:

PO BOX 31809
PALM BEACH GARDENS, FL 33420 US

FEI Number: 26-1248919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TENDRICH, CHAD K
1601 BELVEDERE ROAD
206 EAST
WEST PALM BEACH, FL 33406 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
Name: WALCZAK, PAUL
Address: 2979 PGA BLVD., SUITE 201
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: MGR
Name: TENDRICH, STEVEN A
Address: 1601 BELVEDERE ROAD, SUITE 206 EAST
City-St-Zip: WEST PALM BEACH, FL 33406 US

I hereby 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: PAUL WALCZAK

MGR

04/29/2011

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