2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109355

Entity Name: OB/GYN PROPERTIES, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1725 UNIVERSITY DRIVE SUITE 325 CORAL SPRINGS, FL 33071	3001 CORAL HILLS DRIVE SUITE 360 CORAL SPRINGS, FL 33065 US

Current Mailing Address:	**New Mailing Address:**
1725 UNIVERSITY DRIVE SUITE 325 CORAL SPRINGS, FL 33071	3001 CORAL HILLS DRIVE SUITE 360 CORAL SPRINGS, FL 33065 US

FEI Number: 26-1341558   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
HATTON, DAVID L 150 ALHAMBRA CIRCLE SUITE 1150 CORAL GABLES, FL 33134 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: _____

      Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGR (X) Change ( ) Addition	
Name:	CAMPBELL, MARVIN TRUSTEE	Name:	CAMPBELL, MARVIN TRUSTEE	
Address:	1725 UNIVERSITY DRIVE SUITE 325	Address:	1725 UNIVERSITY DRIVE SUITE 325	
City-St-Zip:	CORAL SPRINGS, FL 33071	City-St-Zip:	CORAL SPRINGS, FL 33071	
Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition	
Name:	NISSETH, URRIBARRI MD	Name:		
Address:	1725 UNIVERSITY DRIVE SUITE 325	Address:		
City-St-Zip:	CORAL SPRINGS, FL 33071	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: MARVIN CAMPBELL   MGR   03/19/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date