

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006764

FILED
Apr 05, 2009
Secretary of State

Entity Name: TWIN LAKES MEDICAL CENTER, LLC

Current Principal Place of Business:

1260 SW 19TH AVENUE
BOCA RATON, FL 33486 US

New Principal Place of Business:

2900 N MILITARY TRAIL
150
BOCA RATON, FL 33431 US

Current Mailing Address:

1260 SW 19TH AVENUE
BOCA RATON, FL 33486 US

New Mailing Address:

2900 N MILITARY TRAIL
150
BOCA RATON, FL 33431 US

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

Name and Address of Current Registered Agent:

PRUDEN, JAMES L ESQ.
980 NORTH FEDERAL HIGHWAY
SUITE 404
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

SHEIKH, TANVEER A
1260 SW 19TH AVE
BOCA RATON, FL 33486 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: TANVEER A SHEIKH

04/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHEIKH, TANVEER A MD
Address: 1260 SW 19TH AVENUE
City-St-Zip: BOCA RATON, FL 33486 US

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: TANVEER A SHEIKH

MGRM

04/05/2009

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