

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008402

FILED
Apr 30, 2009
Secretary of State

Entity Name: WELLINGTON MEDSTAT LLC.

Current Principal Place of Business:

7169 VIA FIRENZE
BOCA RATON, FL 33433 US

New Principal Place of Business:

3319 SR 7
SUITE 102
WELLINGTON, FL 33449 US

Current Mailing Address:

7169 VIA FIRENZE
BOCA RATON, FL 33433 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MENENDEZ, BENNY
7169 VIA FIRENZE
BOCA RATON, FL 33433 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: MENENDEZ, BENNY
Address: 7169 VIA FIRENZE
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM () Delete
Name: BUGGIA, MARY
Address: 7741 BELMONT DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM () Delete
Name: SORRENTINO, ANTHONY
Address: 7741 BELMONT DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: NISENBAUM, ROBERT
Address: 9575 BARLETTA WINDS PT.
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: MGRM (X) Change () Addition
Name: BEECHER, YOLANDA
Address: 4797 SW LAKE GROVE CT.
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM () Change (X) Addition
Name: RODRIGUEZ, FRANCES
Address: 172 FORESTER CT.
City-St-Zip: WELLINGTON, FL 33414 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: BENNY MENENDEZ

MGRM

04/30/2009

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