

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 06, 2010
Secretary of State

Entity Name: URGENT CARE CENTERS OF FLORIDA MANAGEMENT, LLC

Current Principal Place of Business:

C/O LANE R. PHILLIPS
1125 TOWN PARK AVE., SUITE 1011
HEATHROW, FL 32746

New Principal Place of Business:

Current Mailing Address:

LANE PHILLIPS
1125 TOWN PARK AVE SUITE 1011
LAKE MARY, FL 32771

New Mailing Address:

FEI Number: 20-2594577 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PHILLIPS, LANE
1125 TOWN PARK AVE SUITE 1011
LAKE MARY, FL 32771 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: DR
Name: PHILLIPS, LANE
Address: 1125 TOWN PARK AVE STE 1011
City-St-Zip: LAKE MARY, FL 32771

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: LANE PHILLIPS

DR.

04/06/2010

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