

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055083

FILED
Feb 17, 2009
Secretary of State

Entity Name: NMC REAL ESTATE HOLDINGS, LLC

Current Principal Place of Business:

4031 UPPER CREEK DRIVE
SUN CITY CENTER, FL 33573

New Principal Place of Business:

621 LUMSDEN PROFESSIONAL CT
BRANDON, FL 33511

Current Mailing Address:

4031 UPPER CREEK DRIVE
SUN CITY CENTER, FL 33573

New Mailing Address:

621 LUMSDEN PROFESSIONAL CT
BRANDON, FL 33511

FEI Number: 26-2744867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHN, RANDY M.D.
4031 UPPER CREEK DRIVE
SUN CITY CENTER, FL 33573 US

Name and Address of New Registered Agent:

KAHN, RANDY M.D.
621 LUMSDEN PROFESSIONAL CT
BRANDON, FL 33511 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: RANDY KAHN, MD

02/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: STEEL, JOHN R MD
Address: 621 LUMSDEN PROFESSIONAL CT
City-St-Zip: BRANDON, FL 33511

Title: MGR () Change (X) Addition
Name: KAHN, RANDY MD
Address: 621 LUMSDEN PROFESSIONAL CT
City-St-Zip: BRANDON, FL 22511

Title: MGR () Change (X) Addition
Name: GREENBERG, HARVEY MD
Address: 621 LUMSDEN PROFESSIONAL CT
City-St-Zip: BRANDON, FL 33511

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: RANDY KAHN, MD

MGR

02/17/2009

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