

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058438

FILED
Feb 06, 2009
Secretary of State

Entity Name: PHYSICIAN'S GROUP OF THE PALM BEACHES, LLC

Current Principal Place of Business:

8190 JOG ROAD
SUITE #100
BOYNTON BEACH, FL 33472 US

New Principal Place of Business:

Current Mailing Address:

8190 JOG ROAD
SUITE #100
BOYNTON BEACH, FL 33472 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:

QUINONEZ, GERARDO
8190 JOG ROAD
SUITE #100
BOYNTON BEACH, FL 33472 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: QUINONEZ, GERARDO
Address: 8190 JOG ROAD #100
City-St-Zip: BOYNTON BEACH, FL 33472 US

Title: MGR () Delete
Name: CARRILLO, RODOLFO
Address: 8190 JOG ROAD
City-St-Zip: BOYNTON BEACH, FL 33472 US

ADDITIONS/CHANGES:

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

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: GERARDO QUINONEZ MGRM 02/06/2009

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