

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058694

FILED
Jan 05, 2010
Secretary of State

Entity Name: HOSPITALIST M.D. ASSOCIATES, LLC.

Current Principal Place of Business:

10021 PINES BLVD
SUITE # 210
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

10021 PINES BLVD
SUITE # 210
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 26-2836531 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PINA, JULIO D DR.
10021 PINES BLVD
SUITE # 210
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

PINA, GLORIA
10021 PINES BLVD
SUITE # 210
PEMBROKE PINES, FL 33024 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: GLORIA PINA

01/05/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: PINA, GLORIA
Address: 10021 PINES BLVD, SUITE # 210
City-St-Zip: PEMBROKE PINES, FL 33024

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: GLORIA PINA

MGRM

01/05/2010

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