

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069712

FILED
Apr 27, 2010
Secretary of State

Entity Name: CHILDREN'S HEALTHCARE OF CENTRAL FLORIDA, LLC

Current Principal Place of Business:

2105 HARTWOOD MARSH ROAD, SUITE 9
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

2105 HARTWOOD MARSH ROAD, SUITE 9
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 26-2979346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, MARIA ELENA
2105 HARTWOOD MARSH ROAD
SUITE 9
CLERMONT, FL 34711 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: MGR
Name: WATSON, MARIA ELENA
Address: 2105 HARTWOOD MARSH ROAD, SUITE 9
City-St-Zip: CLERMONT, FL 34711

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: MARIA ELENA WATSON

MGR

04/27/2010

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