2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L08000075062

Entity Name: LAKE NONA MEDICAL CITY, LLC

Current Principal Place of Business:

9801 LAKE NONA ROAD
ORLANDO, FL 32827

New Principal Place of Business:

Current Mailing Address:

9801 LAKE NONA ROAD
ORLANDO, FL 32827

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:

B&C CORPORATE SERVICES OF CENTRAL FLORIDA,
390 NORTH ORANGE AVENUE, STE 1400
ORLANDO, FL 32801 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: ( ) Delete
Name:
Address:
City-St-Zip:

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

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

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

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

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

ADDITIONS/CHANGES:

Title: P ( ) Change (X) Addition
Name: ZBORIL, JAMES L
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP ( ) Change (X) Addition
Name: ADAMS, ROBERT B
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP ( ) Change (X) Addition
Name: FERGUSON, LOWELL T
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP ( ) Change (X) Addition
Name: LEVEY, RICHARD L
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP ( ) Change (X) Addition
Name: SMITH, MATTHEW S
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

Title: VP ( ) Change (X) Addition
Name: THAKKAR, RASESH
Address: 9801 LAKE NONA ROAD
City-St-Zip: ORLANDO, FL 32827

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: JAMES L. ZBORIL P 04/28/2009

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

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT - Continued

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ENTITY NAME: **Lake Nona Medical City, LLC**

CURRENT PRINCIPAL PLACE OF BUSINESS

9801 Lake Nona Road
Orlando, Fl 32827

Additional Managing Members/Managers

Title: VP
Name: Seymour, Thaddeus, Jr.
Address: 9801 Lake Nona Road
Orlando, Florida 32827