

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000086046

FILED
Jan 12, 2011
Secretary of State

Entity Name: CRITICAL CARE MANAGEMENT, LLC

Current Principal Place of Business:

920 GREENBRIAR DRIVE
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

920 GREENBRIAR DRIVE
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 26-3335995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE, STE 1100
WEST PALM BEACH, FL 33401 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: MARTIN, BRADFORD J
Address: 920 GREENBRIAR DRIVE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MGRM
Name: SALOMONE-MARTIN, PAMELA M
Address: 920 GREENBRIAR DRIVE
City-St-Zip: BOYNTON BEACH, FL 33435

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: PAMELA SALOMONE-MARTIN

MGRM

01/12/2011

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