

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000110710

FILED
Apr 21, 2009
Secretary of State

Entity Name: HEART CARE CONSULTANTS, LLC

Current Principal Place of Business:

6310 HEALTHPARK WAY
120
BRADENTON, FL 34202

New Principal Place of Business:

Current Mailing Address:

4631 COUNTRY MANOR DRIVE
SARASOTA, FL 34233

New Mailing Address:

6310 HEALTHPARK WAY
120
BRADENTON, FL 34202

FEI Number: 26-3807662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SESHADRI, NIRANJAN
4631 COUNTRY MANOR DRIVE
SARASOTA, FL 34233 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: SESHADRI, NIRANJAN
Address: 4631 COUNTRY MANOR DRIVE
City-St-Zip: SARASOTA, FL 34233

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

ADDITIONS/CHANGES:

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

Title: MR () Change (X) Addition
Name: ALLBEE, RONALD A
Address: 6310 HEALTH PARK WAY SUITE 120
City-St-Zip: BRADENTON, FL 34202

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: RONALD ALLBEE

MR.

04/21/2009

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