

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000007046

FILED
Apr 20, 2011
Secretary of State

Entity Name: HEALTHCARE MANAGEMENT PROVIDERS LLC

Current Principal Place of Business:

115 WATERBERRY DRIVE
TARPON SPRINGS, FL 34688

New Principal Place of Business:

Current Mailing Address:

115 WATERBERRY DRIVE
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 27-1796317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

KENAN, IMAMOVIC
115 WATERBERRY DRIVE
TARPON SPRINGS, FL 34688 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: KENAN IMAMOVIC

04/20/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: IMAMOVIC, KENAN
Address: 115 WATERBERRY DRIVE
City-St-Zip: TARPON SPRINGS, FL 34688

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: KENAN IMAMOVIC

MGRM

04/20/2011

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