

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000012412

**FILED**  
**May 09, 2012**  
**Secretary of State**

**Entity Name:** BETHEL MEDICAL CARE, LLC

**Current Principal Place of Business:**

10075 JOG ROAD  
311  
BOYNTON BEACH, FL 33437 US

**New Principal Place of Business:**

**Current Mailing Address:**

10075 JOG ROAD  
311  
BOYNTON BEACH, FL 33437 US

**New Mailing Address:**

**FEI Number:** 27-1822069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SUAREZ, ANGELICA  
8685 DAYSTAR RIDGE POINT  
BOYNTON BEACH, FL 33473 US

**Name and Address of New Registered Agent:**

KEVIENE, RUTHERFORD  
8685 DAYSTAR RIDGE POINT  
BOYNTON BEACH, FL 33473 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: KEVIENE RUTHERFORD

05/09/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KEVIENE, RUTHERFORD  
Address: 8685 DAYSTAR RIDGE POINT  
City-St-Zip: BOYNTON BEACH, FL 33473 US

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: KEVIENE RUTHERFORD

MD

05/09/2012

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