

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000085104

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** VHS LEASING, LLC

**Current Principal Place of Business:**

5121 BOWDEN ROAD  
STE 306  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

5121 BOWDEN ROAD  
STE 306  
JACKSONVILLE, FL 32216

**New Mailing Address:**

PO BOX 56695  
JACKSONVILLE, FL 322416695

**FEI Number:** 27-3236880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAXWELL, DOUGLAS R  
1538 THE GREENS WAY  
STE 105  
JACKSONVILLE BEACH, FL 32250 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  
**Name:** GURGIS, VIVIAN S  
**Address:** 5121 BOWDEN ROAD, STE 306  
**City-St-Zip:** JACKSONVILLE, FL 32216

**Title:** MGRM  
**Name:** WALDROP, HOLLY N  
**Address:** 5121 BOWDEN ROAD, STE 306  
**City-St-Zip:** JACKSONVILLE, FL 32216

**Title:** MGRM  
**Name:** KASSNER, SUE A  
**Address:** 5121 BOWDEN ROAD, STE 306  
**City-St-Zip:** JACKSONVILLE, FL 32216

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:** HOLLY N WALDROP

PRES

01/04/2011

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