

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000089495

FILED
Apr 17, 2012
Secretary of State

Entity Name: ATHENS MEDICAL COMPLEX, LLC

Current Principal Place of Business:

319 CLEMATIS STREET, STE. 1008
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

PO BOX 3228
WEST PALM BEACH, FL 33402

New Mailing Address:

FEI Number: 27-4186912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 S FLAGLER DR
STE 1100
W 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: MGRM
Name: CASH, DAVID F
Address: 1044 N US HWY 1, STE 202
City-St-Zip: JUPITER, FL 33477

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: DAVID CASH

MGRM

04/17/2012

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