2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2011
Secretary of State

DOCUMENT# L10000106466

Entity Name: CATASTROPHIC CARE MANAGEMENT ASSOCIATES, LLC

Current Principal Place of Business:

631 U.S. HIGHWAY 1
SUITE 303
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

631 U.S. HIGHWAY 1
SUITE 303
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 27-5002258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PECK, DEBORAH C
631 U.S. HIGHWAY 1
SUITE 303
NORTH PALM BEACH, FL FL 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: PECK, DEBORAH C
Address: 631 U.S. HIGHWAY 1, SUITE 303
City-St-Zip: NORTH PALM BEACH, FL 33408 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 Statues.

SIGNATURE: DEBORAH C. PECK MGRM 04/11/2011

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