

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000008636

FILED
May 01, 2012
Secretary of State

Entity Name: CORAL GABLES ORTHOPAEDIC ASSOCIATES, LLC

Current Principal Place of Business:

2601 SW 37TH AVENUE
SUITE 607
CORAL GABLES, FL 33133

New Principal Place of Business:

2580 METROCENTRE BLVD
SUITE 1
WEST PALM BEACH, FL 33407

Current Mailing Address:

PO BOX 6455
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 27-4607398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAIN AND SPINE CENTER LLC
2580 METROCENTRE BLVD. W.
SUITE 1
WEST PALM BEACH, FL 33407 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: BRAIN AND SPINE CENTER, LLC
Address: 2580 METROCENTRE BLVD W., SUITE 1
City-St-Zip: WEST PALM BEACH, FL 33407

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: RAFAEL FOSS

MM

05/01/2012

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