

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000056795

FILED
Apr 27, 2012
Secretary of State

Entity Name: PALM BEACH MEDICAL COLLEGE CLINICS, LLC

Current Principal Place of Business:

4 HARVARD CIR. SUITE 800
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

4 HARVARD CIR. SUITE 800
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 45-2462679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENKHAUS, DAVID J
1900 GLADES ROAD SUITE 401
BOCA RATON, FL FL33431 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: MGR
Name: PALM BEACH MEDICAL EDUCATION CORPORATION
Address: 4 HARVARD CIRCLE, SUITE 800
City-St-Zip: WEST PALM BEACH, FL 33409

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: CARLOS MARTINI, MD

PCEO

04/27/2012

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