

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L94000000306

FILED
Apr 13, 2010
Secretary of State

Entity Name: COMPREHENSIVE HEALTH MANAGEMENT OF FLORIDA, L.C.

Current Principal Place of Business:

8735 HENDERSON ROAD
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

8735 HENDERSON ROAD
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-3254470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CUNNINGHAM, ALEXANDER R
Address: 8735 HENDERSON ROAD
City-St-Zip: TAMPA, FL 33634

Title: MGR
Name: TRAN, THOMAS L
Address: 8735 HENDERSON ROAD
City-St-Zip: TAMPA, FL 33634

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: THOMAS L. TRAN

MGR

04/13/2010

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