

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000213

FILED
Mar 12, 2008
Secretary of State

Entity Name: R.G. ROY HOSPITAL AND SPECIAL MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

2741 N.E. 31ST COURT
ATTN: DR. ROBERT G. ROY
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

660 US HIGHWAY ONE
THIRD FLOOR
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 65-0734484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITMIRE, DRENNEN L JR
HAILE, SHAW & PFAFFENBERGER P.A.
660 US HIGHWAY ONE, 3RD FLR
NORTH PALM BEACH, FL 33408 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: MGMR () Delete
Name: ROY, ROBERT G
Address: 2741 N.E. 31ST COURT
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGMR () Delete
Name: ROY, KAREN S
Address: 2741 N.E. 31ST COURT
City-St-Zip: LIGHTHOUSE POINT, FL 33064

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT G. ROY

MGMR

03/12/2008

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