## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L99000004369

Entity Name: WESTCHESTER PEDIATRIC ASSOCIATES, L.C.

FILED Feb 02, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7000 S.W. 97TH AVENUE, STE 114 10300 SUNSET DRIVE MIAMI, FL 331731474

SUITE # 351 MIAMI, FL 33173

**Current Mailing Address: New Mailing Address:** 

7000 S.W. 97TH AVENUE, STE 114 10300 SUNSET DRIVE MIAMI, FL 331731474

SUITE # 351 MIAMI, FL 33173

ADDITIONS/CHANGES:

(X) Change ( ) Addition

FEI Number: 65-0932335 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RODRIGUEZ, JUAN E 80 S.W. 8TH STREET, STE 2550 MIAMI, FL 33130

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:

MGRM Title: () Delete

FERNANDEZ-PUJOL, MARGARITA FERNANDEZ-PUJOL, MARGARITA Name: Name: 7000 S.W. 97TH AVE., STE 114 Address: 10300 SUNSET DRIVE, STE #351 Address:

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33173

(X) Change ( ) Addition Title: MGRM ( ) Delete Title: MGRM MONTIEL, CHRISTINA R Name: MONTIEL, CHRISTINA R Name:

Address: 7000 S.W. 97TH AVE., STE 114 Address: 10300 SUNSET DRIVE, STE #351 City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition LARCADA, PAMELA LARCADA, PAMELA Name: Name:

7000 S.W. 97TH AVE., STE 114 10300 SUNSET DRIVE, STE #351 Address: Address:

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33173

(X) Change ( ) Addition Title: MGRM ( ) Delete Title: MGRM Name:

Name: LOPEZ, JOHANNES LOPEZ, JOHANNES

Address: 7000 SW 97TH AVE., STE. 114 Address: 10300 SUNSET DRIVE, STE #351

City-St-Zip: MIAMI, FL 33173 City-St-Zip: MIAMI, FL 33173

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: MARGARITA FERNANDEA-PUJOL **MGRM** 02/02/2009