## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L99000006393

Name:

Address:

City-St-Zip:

3536 NORTH FEDERAL HWY

FORT LAUDERDALE, FL 33308

Entity Name: THE GREATER FORT LAUDERDALE HEART GROUP, LLC.

FILED Apr 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3536 NORTH FEDERAL HWY FORT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** 3536 NORTH FEDERAL HWY 3536 NORTH FEDERAL HWY FORT LAUDERDALE, FL 33308 200 FORT LAUDERDALE, FL 33308 FEI Number: 65-0951116 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALTSCHULER, HAROLD MD ALTSCHULER, HAROLD MD 3536 NORTH FEDERAL HIGHWAY 3536 NORTH FEDERAL HIGHWAY FORT LAUDERDALE, FL 33308 200 FORT LAUDERDALE, FL 33308 US 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: HAROLD ALTSCHULER 04/30/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ALTSCHULER, HAROLD Name: Name: 3536 NORTH FEDERAL HWY Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MOODY, CARROLL Name: Name: Address: 3536 NORTH FEDERAL HWY Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: MGR () Delete Title: () Change () Addition DENNIS, JEFFREY Name: Name: 3536 NORTH FEDERAL HWY Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition NIEDERMAN, ALAN

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HAROLD ALTSCHULER 04/30/2009