

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007226

FILED
Feb 23, 2010
Secretary of State

Entity Name: COCONUT CREEK PHYSICIANS, P.L.

Current Principal Place of Business:

3880 COCONUT CREEK PARKWAY
#100
COCONUT CREEK, FL 33066

New Principal Place of Business:

Current Mailing Address:

3880 COCONUT CREEK PARKWAY
#100
COCONUT CREEK, FL 33066

New Mailing Address:

FEI Number: 65-0958084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORNBERG, JOEL M.D.
7301-A WEST PALMETTO PARK ROAD, SUITE 305C
BOCA RATON, FL 33433 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: ANGELILLO, MICHAEL M.D.
Address: 3880 COCONUT CREEK PARKWAY
City-St-Zip: COCONUT CREEK, FL 33066

Title: MGRM
Name: MORGAN, HOLLY
Address: 3880 COCONUT CREEK PARKWAY
City-St-Zip: COCONUT CREEK, FL 33066

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: HOLLY MORGAN

MGRM

02/23/2010

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