


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # M00000001665 1. Entity Name WEST PALM BEACH MEDICAL INVESTORS, LLC	
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Principal Place of Business 3001 KEITH STREET CLEVELAND, TN 37312	Mailing Address 3001 KEITH STREET CLEVELAND, TN 37312
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DO NOT WRITE IN THIS SPACE



01232008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 62-1829254	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000910341
05/06/08-80106-009 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEST PALM EACH MEDICAL INC 357 KEITH STREET NW CLEVELAND, TN 37312
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 

4-14-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Joan E. Thurmond, Assistant Secretary of Corporate Manager

100000001665

EXHIBIT "A"

**West Palm Beach Medical Investors, LLC
3570 Keith Street, NW
Cleveland, TN 37312**

Members

Consolidated Resources Health Care Fund I, L.P.	3570 Keith Street, NW	Cleveland, TN 37312
West Palm Beach Medical, Inc.	3570 Keith Street, NW	Cleveland, TN 37312

Officers

N/A

Corporate Manager

West Palm Beach Medical, Inc.