

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000005040

FILED
Apr 04, 2012
Secretary of State

Entity Name: EAGLE HOSPITALIST CONNECTIONS, LLC

Current Principal Place of Business:

5901-C PEACHTREE DUNWOODY ROAD SUITE 350
ATLANTA, GA 30328

New Principal Place of Business:

Current Mailing Address:

5901-C PEACHTREE DUNWOODY ROAD SUITE 350
ATLANTA, GA 30328

New Mailing Address:

16000 N. DALLAS PKWY STE 450
DALLAS, TX 75248

FEI Number: 51-0646606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CFO
Name: MCCOLPIN, PATRICK
Address: 16000 N. DALLAS PKWY STE 450
City-St-Zip: DALLAS, TX 75248

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: PATRICK MCCOLPIN

CFO

04/04/2012

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