

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000001432

Entity Name: HEALTHCARE MANAGEMENT ASSOCIATES L.L.C.

Current Principal Place of Business:

2100 LAKE IDA ROAD
SUITE #1
DELRAY BEACH, FL 33445

Current Mailing Address:

2100 LAKE IDA ROAD
SUITE #1
DELRAY BEACH, FL 33445

FEI Number: 46-4415637

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SITNER, ROBERT R
2100 LAKE IDA ROAD
SUITE #1
DELRAY BEACH, FL 33445 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name BOTTARI, STEVEN
Address 2100 LAKE IDA ROAD
City-State-Zip: DELRAY BEACH FL 33445

Title MGR
Name SITNER, ROBERT
Address 2100 LAKE IDA ROAD
City-State-Zip: DELRAY BEACH FL 33445

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT R SITNER

MGR

01/14/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date