

2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A93000001346

FILED
Apr 28, 2010
Secretary of State

Entity Name: BAY AREA ENDOSCOPY AND SURGERY CENTER LIMITED PARTNERSHIP

Current Principal Place of Business:

5771 49TH STREET NORTH
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

5767 49TH STREET NORTH
ST. PETERSBURG, FL 33709

New Mailing Address:

FEI Number: 59-3213374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEL RIO, J. EDWARD CPA
888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

KAMATH, JAYAPRAKASH K MD
5767 49TH STREET NORTH
ST. PETERSBURG, FL 33709 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: JAYAPRAKASH KAMATH MD

04/28/2010

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #: P93000073689
Name: BAY AREA ENDOSCOPY ASSOCIATES, INC.
Address: 5771 49TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: JAYAPRAKASH KAMATH MD

PRES

04/28/2010

Electronic Signature of Signing General Partner

Date