

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021899

FILED
Jul 06, 2004
Secretary of State

Entity Name: TAMPA BAY SPECIALTY SURGERY CENTER, L.L.C.

Current Principal Place of Business:

6500 - 66TH ST N.
SAINT PETERSBURG, FL 33781

New Principal Place of Business:

Current Mailing Address:

6500 - 66TH ST N.
SAINT PETERSBURG, FL 33781

New Mailing Address:

FEI Number: 33-1019420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S ESQ.
1245 COURT ST., STE. 102
CLEARWATER, FL 33756 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/MEMBERS:

Title: MGR () Delete
Name: TAMPA BAY ORTHOPAEDI, C SPECIALISTS, P.A.
Address: 6500 - 66TH ST N.
City-St-Zip: SAINT PETERSBURG, FL 33781

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAVIDSON, PHILIP A MD
Address: 6500 - 66TH ST N.
City-St-Zip: SAINT PETERSBURG, FL 33781

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: PHILIP A. DAVIDSON, MD

MGR

07/06/2004

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