

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006467

FILED
Apr 12, 2004
Secretary of State

Entity Name: TWIN LAKES SURGERY CENTER, LLC

Current Principal Place of Business:

2323 CURLEW ROAD, SUITE 7E
DUNEDIN, FL 34698

New Principal Place of Business:

1890 LPGA BOULEVARD, SUITE 200
DAYTONA BEACH, FL 32117

Current Mailing Address:

2323 CURLEW ROAD, SUITE 7E
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: 54-2097061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSON, CHARLES J
2323 CURLEW ROAD, SUITE 7E
DUNEDIN, FL 34698

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CARBIENER, PAMELA B M.D.
Address: 30 TWELVE OAKS TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR () Change (X) Addition
Name: BRYAN, JAMES M M.D.
Address: 1629 N. HALIFAX AVENUE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: MGR () Change (X) Addition
Name: FABIAN, MICHAEL A M.D.
Address: 311 N. CLYDE MORRIS BLVD., SUITE 550
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGR () Change (X) Addition
Name: RAMSHAW, DAVID G M.D.
Address: 311 N. CLYDE MORRIS BLVD., SUITE 550
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGR () Change (X) Addition
Name: BIANCHI, JOSEPH D M.D.
Address: 311 N. CLYDE MORRIS BLVD., SUITE 550
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGR () Change (X) Addition
Name: HARRINGTON, MICHAEL M.D.
Address: 311 N. CLYDE MORRIS BLVD., SUITE 550
City-St-Zip: DAYTONA BEACH, FL 32114

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: MICHAEL A. FABIAN, M.D.

MGR

04/12/2004

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

SERGIO ZAMORA, M.D., MGR
290 N. CLYDE MORRIS BLVD., SUITE A
ORMOND BEACH, FL 32176

ANTHONY J. MARTINEZ, M.D., MGR
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PALM COAST, FL 32164

DALE R. TRAFICANTE, M.D., MGR
11 HUNTSMAN LOOK
ORMOND BEACH, FL 32174

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DAYTONA BEACH, FL 32117

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DAYTONA BEACH, FL 32115

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DAYTONA BEACH, FL 32128

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PORT ORANGE, FL 32127

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PORT ORANGE, FL 32127

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