

**2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Mar 16, 2012  
Secretary of State**

DOCUMENT# L03000038278

**Entity Name:** SOUTH PALM AMBULATORY SURGERY CENTER, LLC

**Current Principal Place of Business:**

1905 CLINT MOORE RD.  
SUITE 115  
BOCA RATON, FL 33496

**New Principal Place of Business:**

**Current Mailing Address:**

1905 CLINT MOORE RD.  
SUITE 115  
BOCA RATON, FL 33496

**New Mailing Address:**

**FEI Number:** 20-0313969      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301      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:** MGR  
**Name:** COHEN, M.D., RICHARD G.  
**Address:** 3020 NORTH MILITARY TRAIL, SUITE 150  
**City-St-Zip:** BOCA RATON, FL 33431

**Title:** MGR  
**Name:** EISNER, M.D., TODD  
**Address:** 951 NW 13TH STREET NO. 2E  
**City-St-Zip:** BOCA RATON, FL 33486

**Title:** MGR  
**Name:** GOLD, M.D., LEWIS  
**Address:** 1613 N. HARRISON PARKWAY, SUITE 200  
**City-St-Zip:** SUNRISE, FL 33323

**Title:** MGR  
**Name:** WALTER, MARK  
**Address:** 1613 N. HARRISON PARKWAY, SUITE 200  
**City-St-Zip:** SUNRISE, FL 33323

**Title:** MGR  
**Name:** PATRICK, SOLOMON  
**Address:** 1613 N. HARRISON PARKWAY, SUITE 200  
**City-St-Zip:** SUNRISE, FL 33323

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: MARK WALTER

MGR

03/16/2012

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