

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022915

FILED
Jan 29, 2007
Secretary of State

Entity Name: GULF COAST SURGICAL WEIGHT LOSS CENTER, PLLC

Current Principal Place of Business:

250 2ND STREET EAST
BRADENTON, FL 34208

New Principal Place of Business:

200 3RD STREET WEST
SUITE 110
BRADENTON, FL 34205

Current Mailing Address:

250 2ND STREET EAST
BRADENTON, FL 34208

New Mailing Address:

200 3RD STREET WEST
SUITE 110
BRADENTON, FL 34205

FEI Number: 20-4507764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLALOCK, WALTERS, HELD & JOHNSON, P.A.
802 11TH STREET WEST
BRADENTON, FL 34205 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: MGRM () Delete
Name: BUNCH, GARY M M.D.
Address: 250 2ND STREET EAST
City-St-Zip: BRADENTON, FL 34208 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BUNCH, GARY M M.D.
Address: 200 3RD STREET WEST, SUITE 110
City-St-Zip: BRADENTON, FL 34205 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GARY M. BUNCH, M.D.

MGRM

01/29/2007

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