## 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000034904

Entity Name: SARASOTA PHYSICIANS SURGICAL CENTER, LLC

FILED Feb 16, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3201 SOUTH TAMIAMI TRAIL SARASOTA, FL 34239

Current Mailing Address: New Mailing Address:

C/O J.A. ZISKIND, ESQ. 3059 GRAND AVENUE, SUITE 300 MIAMI, FL 33133

FEI Number: 43-2110985 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR

Name: ZISKIND, J A ESQ.

Address: 3059 GRAND AVENUE, SUITE 300

City-St-Zip: MIAMI, FL 33133

Title: MGR

Name: WEINKLE, DANA J M.D.

Address: 3131 S. TAMIAMI TRAIL, SUITE 201

City-St-Zip: SARASOTA, FL 34239

Title: MGR

Name: MARLOWE, ANDREW M M.D. Address: 5432 BEE RIDGE ROAD, SUITE 150

City-St-Zip: SARASOTA, FL 34233

Title: MGR

Name: SUGAR, DAVID A M.D.

Address: C/O SOA 2750 BAHIA VISTA ST., SUITE 100

City-St-Zip: SARASOTA, FL 34239

Title: MGR

Name: YUNIS, JONATHAN P M.D. Address: 1921 WALDEMERE ST., SUITE 504

City-St-Zip: SARASOTA, FL 34239

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 Statues.

SIGNATURE: J.A. ZISKIND, ESQUIRE MGR 02/16/2010