

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009189

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: ST. LUCIE ANESTHESIA ASSOCIATES, LLC

**Current Principal Place of Business:**

2112 SOUTH US HIGHWAY 1  
SUITE 201  
FT. PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

2112 SOUTH US HIGHWAY 1  
SUITE 201  
FT. PIERCE, FL 34950

**New Mailing Address:**

FEI Number: 26-1822664      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DONALD L. BELL  
1016 SHALIMAR DRIVE  
TALLAHASSEE, FL 32312      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: STEVEN M LANGER, INC, .  
Address: 3 NE LOFTING WAY  
City-St-Zip: STUART, FL 34996

Title: MGRM ( ) Delete  
Name: JULIE CRISPIN, INC.,  
Address: 2112 SOUTH U.S. HWY 1 SUITE 201  
City-St-Zip: FT. PIERCE, FL 34950

Title: MGRM ( ) Delete  
Name: STEPHANIE DRABIN, IN, C.  
Address: 1600 NW FORK RD.  
City-St-Zip: STUART, FL 34994

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN M. LANGER FOR STEVEN M LANGER, INC.      MGRM      03/21/2009

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