

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000079379

Entity Name: LLK ANESTHESIA, LLC

FILED
Jun 10, 2009
Secretary of State

Current Principal Place of Business:

6810 NW 101ST TERRACE
PARKLAND, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

6810 NW 101ST TERRACE
PARKLAND, FL 33076 US

New Mailing Address:

FEI Number: 26-3210640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KORENGE, LOREN
6810 NW 101ST TERRACE
PARKLAND, FL 33076 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: KORENGE, LOREN
Address: 6810 NW 101ST TERRACE
City-St-Zip: PARKLAND, FL 33076 US

ADDITIONS/CHANGES:

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: LOREN L KORENGE

MGRM

06/10/2009

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