

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000093997

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** CRANE CREEK SURGICAL PARTNERS MANAGEMENT LLC

**Current Principal Place of Business:**

2222 SOUTH HARBOR CITY BOULEVARD  
SUITE 540  
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

**Current Mailing Address:**

2222 SOUTH HARBOR CITY BOULEVARD  
SUITE 540  
MELBOURNE, FL 32901 US

**New Mailing Address:**

**FEI Number:** 26-3488614      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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: BRENNAN, ROBERT M.D.  
Address: 2222 SOUTH HARBOR CITY BLVD, SUITE 540  
City-St-Zip: MELBOURNE, FL 32901 US

Title: MGR  
Name: HYNES, RICHARD A M.D.  
Address: 2222 SOUTH HARBOR CITY BLVD, SUITE 540  
City-St-Zip: MELBOURNE, FL 32901 US

Title: MGR  
Name: BORBOROGLU, PRODOMOS M.D.  
Address: 2222 SOUTH HARBOR CITY BLVD, SUITE 540  
City-St-Zip: MELBOURNE, FL 32901 US

Title: MGR  
Name: LELAND, JEFF  
Address: 4760 RED BANK EXPRESSWAY, SUITE 222  
City-St-Zip: CINCINNATI, OH 45227 US

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: JAY ROM      PRES      05/01/2012

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