

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000003023

FILED
Jan 16, 2012
Secretary of State

Entity Name: COASTAL ANESTHESIA GROUP, LLC

Current Principal Place of Business:

9887 4TH STREET NORTH
SUITE 234
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

9887 4TH STREET NORTH
SUITE 234
ST. PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 27-4643137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BACHMAN, RADHA V ESQUIRE
401 EAST JACKSON STREET
SUITE 2500
TAMPA, FL 33602 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: CURVV, LLC
Address: 9887 4TH STREET NORTH, SUITE 234
City-St-Zip: SAINT PETERSBURG, FL 33702

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: CURVV

MGR

01/16/2012

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