2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M03000002024

1. Entity Name

THE ROCKLEDGE FL ENDOSCOPY ASC, LLC



FILED
May 04, 2007 08:00 A
Secretary of State

Principal Place of Business

Mailing Address

20 BURTON HILLS BLVD., 5TH FLOOR NASHVILLE, TN 37215

20 BURTON HILLS BLVD., 5TH FLOOR NASHVILLE, TN 37215



02012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For
20-0073131	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

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6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its re the obligations of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	at.
SIGNATURE		

(NOTE, Registered Agent signature required when reinstating)

Filing Fee Is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS IIILE MGRM AMSURG HOLDINGS, INC. STREET ADDRESS CITY-ST-ZIP NASHVILLE, TN 37215 IIILE MGRM BREVARD GI ASSOCIATES, LLC 1273 FLORIDA AVE CITY-ST-ZIP ROCKLEDGE, FL 32955 IIILE NAME STREET ADDRESS CITY-ST-ZIP		
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	CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING

, OR AUTHORIZED REPRESENTATIVE

4/27/07

615-665-1283

Daytime Phone #