

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016774

Entity Name: DEAN J. GOBO, M.D. NEUROSURGERY CONSULTANTS, P.L.

Current Principal Place of Business:

430 MORTON PLANT ST
SUITE 401
CLEARWATER, FL 33756

Current Mailing Address:

430 MORTON PLANT ST
STE 401
CLEARWATER, FL 33756 US

FEI Number: 01-0729251

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLBASSANI, CHARLES J
430 MORTON PLANT ST
STE 401
CLEARWATER, FL 33756 US

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

Authorized Person(s) Detail :

Title MGR
Name GOBO, DEAN JM.D.
Address 430 MORTON PLANT ST, STE 401
City-State-Zip: CLEARWATER FL 33756

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEAN J GOBO

OWNER

02/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date