

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000015663

Entity Name: BRANDON AMBULATORY SURGERY CENTER, LC

Current Principal Place of Business:

514 EICHENFELD DRIVE
BRANDON, FL 33511

Current Mailing Address:

514 EICHENFELD DRIVE
BRANDON, FL 33511 US

FEI Number: 20-2387834

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: NATHAN GIFFIN

03/19/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name SCA-BRANDON, LLC
Address 569 BROOKWOOD VILLAGE
SUITE 901
City-State-Zip: BIRMINGHAM AL 35209

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCA-BRANDON, LLC

MEMBER

03/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date