

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000108202

Entity Name: BRADENTON AREA TRAUMA SURGEONS (BATS), LLC

Current Principal Place of Business:

110 39TH STREET CT. NW
BRADENTON, 205

Current Mailing Address:

P.O. BOX 14731
BRADENTON, FL 34280-4731

FEI Number: 45-3677183

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENE, ROBERT FESQUIRE
601 12TH STREET WEST
BRADENTON, FL 34205 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 MGRM
Name PENNEBACKER, PAIGE K
Address 110 39TH STREET CT. NW
City-State-Zip: BRADENTON 205

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: PAIGE K PENNEBACKER

MGRM

01/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date