

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000001561

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** ASC GAMMA PARTNERS, LTD.

**Current Principal Place of Business:**

5501 W GRAY ST  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

5501 W GRAY ST  
TAMPA, FL 33609

**New Mailing Address:**

**FEI Number:** 43-1961039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**GENERAL PARTNER INFORMATION:**

Document #: L05000093814  
Name: SURGERY PARTNERS OF WEST KENDALL, LLC  
Address: 5501 W GRAY ST  
City-St-Zip: TAMPA, FL 33609

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: JOHN W. LAWRENCE, JR.

SVP

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date