2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A0400001900

Entity Name: AMBULATORY SURGERY CENTER OF BOCA RATON, LTD.

FILED Jan 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9960 CENTRAL PARK BOULEVARD SOUTH 1905 CLINT MOORE RD

SUITE 302 SUITE 300

BOCA RATON, FL 33428 US BOCA RATON, FL 33496 US

Current Mailing Address: New Mailing Address:

9960 CENTRAL PARK BOULEVARD SOUTH 1905 CLINT MOORE ROAD

SUITE 302 SUITE 300

BOCA RATON, FL 33428 US BOCA RATON, FL 33496 US

FEI Number: 20-2386540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOPKINS, EDWARD J ESQ.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 US
AHRON, BARRY
2790 N FEDERAL HIGHWAY
SUITE 400
BOCA RATON, FL 33431 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: BARRY AHRON 01/28/2008

Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #: P04000162556

Name: AMBULATORY SURGERY CENTER OF BOCA RATON GP

Address: 9960 CENTRAL PARK BLVD. SOUTH #302 Address: 1905 CLINT MOOR ROAD STE 300 City-St-Zip: BOCA RATON, FL 33428 US City-St-Zip: BOCA RATON, FL 33496 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: AMBULATORY SURGICAL CENTER OF BOCA RATON

01/28/2008