## 2011 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A93000000719

Entity Name: NORTHWEST FLORIDA SURGERY CENTER, LTD.

FILED Apr 25, 2011 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
767 AIRPORT ROAD PANAMA CITY, FL 3240	5			
Current Mailing Address:		New Mailing Address:		
767 AIRPORT ROAD PANAMA CITY, FL 3240	5			
FEI Number: 59-3123289	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
BRYANT, ROWLETT W 833 HARRISON AVENUE PANAMA CITY, FL 3240	<del></del>			
The above named entity s in the State of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both	
SIGNATURE:				
Electron	ic Signature of Registered Ago	ent	Date	
GENERAL PARTNER IN	IFORMATION:	ADDRESS CHANGES	ONLY:	
Document #: V63202	OPIDA SUPCERVICENTER INC			

Name: NORTHWEST FLORIDA SURGERY CENTER, INC.

 Address:
 767 AIRPORT ROAD
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32405
 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: RON SAMUELIAN CEO 04/25/2011