## 2012 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A94000001186

Entity Name: SURGICARE OF CENTRAL FLORIDA, LTD.

FILED Feb 07, 2012 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
900 GRIFFIN ROAD LAKELAND, FL 33804	US		
Current Mailing Address:		New Mailing Address:	
900 GRIFFIN ROAD LAKELAND, FL 33804	US		
FEI Number: 75-2556633	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of	f Current Registered Agent:	Name and Address o	f New Registered Agent:
DORSETT, KEVIN A 1247 LAKELAND HILL: LAKELAND, FL 33805			
The above named entit in the State of Florida.	ry submits this statement for the μ	purpose of changing its registered	d office or registered agent, or bot
SIGNATURE:			
Electr	onic Signature of Registered Age	ent	Date
GENERAL PARTNER	INFORMATION:	ADDRESS CHANGES	S ONLY:
Document #: L100000584	OF LAKELAND II C		

Address: 1247 LAKELAND HILLS BLVD Address: City-St-Zip: LAKELAND, FL 33805 US 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.

**PRES** SIGNATURE: KEVIN A. DORSETT 02/07/2012