2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED May 16, 2005 08:00 AM Secretary of State

	rue By May 1, 200	Secretary of State		
DOCUMENT # B97000000266 1. Entity Name THE PALMETTO ASC, L.P.				·
Principal Place of Business 20 BURTON HILLS BLVD., 5TH FLOOR NASHVILLE, TN 37215 Malling Address 20 BURTON HILLS BLVD. NASHVILLE, TN 37215				
2. Principal Place of Business	3. Mailing Address	.,		
Suite, Apt #, etc.	Suite, Apt. #, etc.	* ;	04222005 Chg-LP	CR2E003 (10/03)
City & State	City & State		4. FEI Number 62-1647406	Applied For Not Applicable
Zip Countr	y Zip	Country	Certificate of Status Desired Name and Address of New Regire	\$8.75 Additional Fee Required
6. Name and Add	ress of Current Hegistered Agent	Name	7. Name and Address of New Regis	stered Agent
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION, FL 33324			रुख¥	
		City		FL Zip Code
The above named entity submits the obligations of registered ager	this statement for the purpose of changing	g its registered office or regist	ered agent, or both, in the State of Florida	a. I am familiar with, and accept
SIGNATURE	me of registered agant and title if applicable.	,		DATE
O. Capital Contributions		apital Contributions to date /, 500, 0	00.00	
A ĜENERA	L PARTNER THAT IS A BUSINESS	ENTITY MUST BE REGIS	STERED AND ACTIVE WITH THIS	OFFICE.
	al Partners MAY NOT be changed o NERAL PARTNER INFORMATION	on the form; an amendment	ent must be filed to change a gene ADDRESS CHANG	
DOCUMENT / F97000002858	NEIGH (AITHELY SAI OHAA 1104	· · ·		
NAME AMSURG PALMETTO, INC. STREET ADDRESS 20 BURTON HILLS BLVD., 5TH FLOOR		STREET ADDRESS CITY-ST-ZIP	05/16705-80033-005 526.25 05/16705-80033-005 526.25	
DOCUMENT! NASHVILLE, TN	37215	STREET ADDRESS		
NAME STREET ADDRESS	TREET ADDRESS		The second secon	
CITY-ST-ZIP DOCUMENT #		CITY-ST-ZIP		
NAME STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP DOCUMENT #	And the second s	CITY-ST-ZIP		
NAME STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
CITY-ST-ZIP COCUMENT # NAME NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS		
		CITY-ST-ZIP		
DOCUMENT / NAME STREET ADDRESS		STREET ADDRESS CITY-ST-ZIP		
indicated on this report is true a	tion supplied with this filing does not qualiful and accurate and that my signature shall hi red to exegute the report as required by C	ave the same legal effect as if	Section 119.07(3)(I), Florida Statutes. I fur made under oath; that I am a General Pa	ther certify that the Information artner of the limited partnership or
{			sec./Treas. 4/26/05	6/5-665-1283
SIGNATURE: Claire M. Gulmi, Sec. Treas. 4/26/05 615-665-1283 SIGNATURE: Amount Printed Name of SIGNING GENERAL PARTNER Amount Palmette, Inc.				