

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003186

FILED
Jan 13, 2010
Secretary of State

Entity Name: MEDICAL SPECIALTY PROCEDURES L.C.

Current Principal Place of Business:

1355 37TH STREET
SUITE 304
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

1355 37TH STREET
SUITE 304
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-1114182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLTON, REBECCA B
1575 INDIAN RIVER BLVD.
SUITE C240
VERO BEACH, FL 32960 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WERNICKI, PETER M.D.
Address: 1355 37TH STREET, SUITE 304
City-St-Zip: VERO BEACH, FL 32960

Title: MGR
Name: BENJAMIN, JOHNNY MD
Address: 1355 37TH ST. SUITE 304
City-St-Zip: VERO BEACH, FL 32960

Title: MGR
Name: SARBAK, JOHN MD
Address: 3735 11TH CIRCLE, SUITE 203
City-St-Zip: VERO BEACH, FL 32960

Title: MGR
Name: PAUL, DEREK MD
Address: 1850 37TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: MGR
Name: TALLEY, M CHRISTOPHER
Address: 1355 37TH ST STE 304
City-St-Zip: VERO BEACH, FL 32960

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHELE MUTCHLER, R.N.

ADM

01/13/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date