

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004529

FILED
Mar 10, 2011
Secretary of State

Entity Name: NEUROSURGICAL CONSULTANTS OF SOUTH FLORIDA, L.L.C.

Current Principal Place of Business:

670 GLADES ROAD
SUITE 100
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

670 GLADES ROAD
SUITE 100
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-1002459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWLER, PATRICK W
7171 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

LAWLER, PATRICK W
811 HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441 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:

03/10/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SACHS, DAVID P MD PA
Address: 670 GLADES ROAD #100
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM
Name: FLORIDA NEUROSCIENCE INSTITUTE LLC
Address: 670 GLADES ROAD #100
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM
Name: PALM BEACH NEURISCIENCES, LLC
Address: 3715 KINGS WAY
City-St-Zip: BOCA RATON, FL 33431

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: DAVID P SACHS MD PA

MGRM

03/10/2011

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