

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004529

FILED
Apr 26, 2012
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
811 HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441 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: 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, MANAGING MEMBER REP.

MGRM

04/26/2012

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