

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
May 04, 2007
Secretary of State**

DOCUMENT# L02000034539

Entity Name: SURGERY CENTER AT WELLINGTON, L.L.C.

Current Principal Place of Business:

New Principal Place of Business:

1395 STATE ROAD 7
SUITE 100
WELLINGTON, FL 33414 US

Current Mailing Address:

New Mailing Address:

1395 STATE ROAD 7
SUITE 100
WELLINGTON, FL 33414 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HERBST, SETH J
1395 STATE ROAD 7
SUITE 100
WELLINGTON, FL 33414 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: ASC OF WELLINGTON, I, NC.
Address: 1395 STATE ROAD 7
City-St-Zip: WELLINGTON, FL 33414 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: SETH J HERBST

MGR

05/04/2007

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