2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012832

Entity Name: LAKEWOOD RANCH ANESTHESIA, PL

206 SECOND STREET EAST

BRADENTON, FL 34208

Address: City-St-Zip: FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	OND STREET E FON, FL 34203			
Current Mailing Address:			New Mailing Address:	
	OND STREET B FON, FL 34203			
FEI Number: 74-3088660 F		FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
601 12TH BRADENT	STREET WES FON, FL 34205	5 US	ourpose of changing its register	ed office or registered agent, or both
	e of Florida.		p	
SIGNATU	RE:			
Electronic Signature of Registered Age			ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () WEINGARTEN, 206 SECOND S BRADENTON, I	STREET EAST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () VILASI, JOHN V 206 SECOND S BRADENTON, I	STREET EAST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () VILASI, JOSEP 206 SECOND S BRADENTON, I	STREET EAST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () ROSENTHAL, N 206 SECOND S BRADENTON, I	STREET EAST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGR () SEVERS, BARI) Delete RY L	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: JONAS WEINGARTEN DR. 03/19/2009