

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017328

FILED
Feb 02, 2011
Secretary of State

Entity Name: THE SURGERY CENTER AT JENSEN BEACH, LLC

Current Principal Place of Business:

3995 NW GOLDENROAD RD
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

3995 NW GOLDENROAD RD
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 65-1198731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENKHAUS, DAVID J
2424 NORTH FEDERAL HWY., STE. 456
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

MENKHAUS, DAVID J
1900 GLADES ROAD
401
BOCA RATON, FL 33431 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:

02/02/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P
Name: PARE, PAUL MD
Address: 3995 NW GOLDENROD RD
City-St-Zip: JENSEN BEACH, FL 34957

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: PAUL PARE, MD

P

02/02/2011

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