

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024307

FILED
Jan 15, 2010
Secretary of State

Entity Name: GULFPOINT ANESTHESIA SERVICES, PL

Current Principal Place of Business:

206 2ND STREET EAST
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

206 2ND STREET EAST
BRADENTON, FL 34208

New Mailing Address:

FEI Number: 20-0079846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, LONGMAN & WALKER, P.A.
1001 3RD AVE WEST
SUITE 670
BRADENTON, FL 34205 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: MGR
Name: WEINGARTEN, JONAS
Address: 206 2ND STREET EAST
City-St-Zip: BRADENTON, FL 34208

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: JONAS WEINGARTEN

DR.

01/15/2010

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