

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002073

FILED
Feb 22, 2008
Secretary of State

Entity Name: MURRELL SURGERY CENTER, LLC

Current Principal Place of Business:

830 EXECUTIVE LANE, SUITE NO. 120
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

830 EXECUTIVE LANE, SUITE NO. 120
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 56-2427331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, LINDA L ESQ.
C/O BUCHANAN INGERSOLL PC
401 EAST JACKSON STREET, SUITE 2500
TAMPA, FL 33602 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 () Delete
Name: ZIEGLER, BRIAN S
Address: 830 EXECUTIVE LANE SUITE 120
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM () Delete
Name: ROBINSON, LAWRENCE
Address: 830 EXECUTIVE LANE SUITE 120
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ROBINSON, LAWRENCE G
Address: 830 EXECUTIVE LANE SUITE 120
City-St-Zip: ROCKLEDGE, FL 32955

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: BRIAN S. ZIEGLER

MGRM

02/22/2008

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