2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# L04000032643

Entity Name: LASER AND OUTPATIENT SURGERY CENTER, L.C.

Current Principal Place of Business:

2631 NW 41ST STREET STE. B-2
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

2631 NW 41ST STREET STE. B-2
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 20-1098451 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

DOWNEY, KEVIN I
2631 NW 41ST STREET STE. B-2
GAINESVILLE, FL 32606 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/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR ( ) Change (X) Addition
Name: SNODGRASS, GREGORY MG MBR
Address: 2631-A NW 41ST STREET
City-St-Zip: GAINESVILLE, FL 32606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: G. SNODGRASS MR 05/04/2005

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