2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# L04000055562

Entity Name: NORTH PINELLAS SURGERY CENTER HOLDING COMPANY, LLC

Current Principal Place of Business:

2323 CURLEW ROAD, BLDG. 5
DUNEDIN, FL 34698 US

New Principal Place of Business:

Current Mailing Address:

2323 CURLEW ROAD, BLDG. 5
DUNEDIN, FL 34698 US

New Mailing Address:

FEI Number: 59-3585728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEIGLE, DEBORAH A
2323 CURLEW ROAD, BLDG. 5
DUNEDIN, FL 34698 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 ( ) Delete
Name: AHN, JOHN DO
Address: 2323 CURLEW ROAD, BLDG 5
City-St-Zip: DUNEDIN, FL 34698 US

Title: DR ( ) Delete
Name: GOYAL, ANOOP MD
Address: 21323 CURLEW ROAD, BLDG 5
City-St-Zip: DUNEDIN, FL 34698 US

Title: DR ( ) Delete
Name: ZEITLIN, LAURENCE MD
Address: 2323 CURLEW ROAD
City-St-Zip: DUNEDIN, FL 34698 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GOYAL, ANOOP MD
Address: 2323 CURLEW ROAD, BLDG 5
City-St-Zip: DUNEDIN, FL 34698 US

Title: DR (X) Change ( ) Addition
Name: AHN, JOHN DO
Address: 21323 CURLEW ROAD, BLDG 5
City-St-Zip: DUNEDIN, FL 34698 US

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

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: ANOOP GOYAL MD MGR 03/27/2009

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