2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068453

Entity Name: THE SURGERY CENTER OF JACKSONVILLE, LLC

FILED Feb 12, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:	
13400 SUTTON PARK DRIVE SOUTH SUITE 1301				10475 CENTURION PARKWAY NORTH SUITE 201	
JACKSONVILLE, FL 32224 US				JACKSONVILLE, FL 32256 US	
Current Mailing Address:				New Mailing Address:	
13400 SUTTON PARK DRIVE SOUTH SUITE 1301				10475 CENTURION PARKWAY NORTH SUITE 201 JACKSONVILLE, FL 32256 US	
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FEI Number:	20-1609582	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: N				Name and Address of New Registered Agent:	
ROBERTS, CHRISTOPHER 13400 SUTTON PARK DRIVE SOUTH SUITE 1301 JACKSONVILLE, FL 32224 US				ROBERTS, CHRISTOPHER 10475 CENTURION PARKWAY NORTH SUITE 201 JACKSONVILLE, FL 32256 US	
The above in the State		bmits this statement for the pu	ırpose o	f changing it	s registered office or registered agent, or both
SIGNATUR	RE: CHRISTOP	HER ROBERTS			02/12/2007
	Electronic	Signature of Registered Ager	nt		Date
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () D ROBERTS, CHRIS 13400 SUTTON P JACKSONVILLE,	STOPHER ARK DRIVE SOUTH, SUITE 1301		Title: Name: Address: City-St-Zip:	MGR (X) Change () Addition MADDERN, BRUCE R 10475 CENTURION PARKWAY NORTH, SUITE 201 JACKSONVILLE, FL 32256 US
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip:	MGR () Change (X) Addition VINCENTY, CLAUDIO E 10475 CENTURION PARKWAY NORTH, SUITE 201 JACKSONVILLE, FL 32256 US
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip:	MGR () Change (X) Addition DESHMUKH, RAHUL 10475 CENTURION PARKWAY NORTH, SUITE 201 JACKSONVILLE, FL 32256 US
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip:	P () Change (X) Addition ROBERTS, CHRISTOPHER 10475 CENTURION PARKWAY NORTH, SUITE 201 JACKSONVILLE, FL 32256 US
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip:	VP () Change (X) Addition CAREY, JOHN E 10475 CENTURION PARKWAY NORTH, SUITE 201 JACKSONVILLE, FL 32256 US
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip:	S () Change (X) Addition MONTERO, PAULO 10475 CENTURION PARKWAY NORTH, SUITE 201 JACKSONVILLE, FL 32256 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER ROBERTS P 02/12/2007