

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071398

FILED
Jan 20, 2009
Secretary of State

Entity Name: RIVERWALK ENDOSCOPY AND SURGERY CENTER, L.L.C.

Current Principal Place of Business:

8380 RIVERWALK PARK BLVD
SUITE 220
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

8380 RIVERWALK PARK BLVD
SUITE 220
FT. MYERS, FL 33919

New Mailing Address:

FEI Number: 20-1692912 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KNOTT, GEORGE H ESQ.
1625 HENDRY STREET SUITE 301
FT. MYERS, FL 33901 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: KESSEL, EVELYN R MD
Address: 6563 DANIEL COURT
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES:

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: EVELYN R. KESSEL, MD MGRM 01/20/2009

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