2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2011
Secretary of State

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Entity Name: CAPE OUTPATIENT SURGICAL TEAM, LLC

Current Principal Place of Business:

6981 LAKE DEVONWOOD DRIVE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

6981 LAKE DEVONWOOD DRIVE
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 20-2001683 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREEN, BRUCE D
1520 ROYAL PALM SQUARE BOULEVARD STE 320
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

KAGAN, ELIZABETH P
6981 LAKE DEVONWOOD DRIVE
FORT MYERS, FL 33908 US

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: ELIZABETH P. KAGAN 01/12/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KAGAN M D, JOHN C
Address: 6981 LAKE DEVONWOOD DR
City-St-Zip: FORT MYERS, FL 33908

I hereby 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 Statues.

SIGNATURE: JOHN C. KAGAN MGRM 01/12/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date