

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001647

FILED
Mar 08, 2006
Secretary of State

Entity Name: NORTHWEST GUARDIAN ANESTHESIA SERVICES, PLLC

Current Principal Place of Business:

5811 PELICAN BAY BLVD.
SUITE 209
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

5811 PELICAN BAY BLVD.
SUITE 209
NAPLES, FL 34108

New Mailing Address:

FEI Number: 03-0552693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KORN, TYLER B ESQ
5811 PELICAN BAY BLVD.
SUITE 209
NAPLES, FL 34108 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: FINN, DARREN
Address: 16970-3 SAN CARLOS BLVD, SUITE 185
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM () Delete
Name: SANDERS, SUZANNE R
Address: 16970-3 SAN CARLOS BLVD., SUITE 185
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FINN, DARREN S
Address: 414 W. 24TH AVE.
City-St-Zip: SPOKANE, WA 99203

Title: MGRM (X) Change () Addition
Name: SANDERS, SUZANNE R
Address: 414 W. 24TH AVE.
City-St-Zip: SPOKANE, WA 99203

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: DARREN S. FINN

MGRM

03/08/2006

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