

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008457

FILED
May 01, 2007
Secretary of State

Entity Name: PROFESSIONAL ANESTHESIA SOLUTIONS, L.L.C.

Current Principal Place of Business:

120 PENNSYLVANIA AVENUE
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

120 PENNSYLVANIA AVENUE
PALM HARBOR, FL 34683

New Mailing Address:

FEI Number: 27-8604079 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET, STE. 102
CLEARWATER, FL 33756 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JANICE, MONTELARO L MGMR
Address: 120 PENNSYLVANIA AVE
City-St-Zip: PALM HARBOR, FL 346783 US

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: JANICE L MONTELARO

PRES

05/01/2007

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