

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038862

FILED
Jul 20, 2006
Secretary of State

Entity Name: FT. LAUDERDALE SURGICAL CENTER, LLC

Current Principal Place of Business:

1150 N. 35TH AVENUE, SUITE 490
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

1150 N. 35TH AVENUE, SUITE 490
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-2713024 **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:

CHASE, ALAN R ESQUIRE
9400 S. DADELAND BOULEVARD, SUITE 600
MIAMI, FL 33156 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: HAND, TIMOTHY J
Address: SOUTHERN MEDICAL, LLC, 605 STATE STREET
City-St-Zip: AUGUSTA, KS 67010 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: TIMOTHY HAND

MGRM

07/20/2006

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