## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000044741

Entity Name: FLEMING ISLAND SURGERY CENTER, LLC

FILED May 03, 2007 Secretary of State

Current Principal Place of Business:		New Princip	New Principal Place of Business:	
1680-A EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003			1670-B EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003	
Current Mailing Address:		New Mailing	New Mailing Address:	
1680-A EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003			1670-B EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003	
In accordan	: 20-2874196			
POWERS, ROBERT R JR 1680-A EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003 US		1670-B EAGL	POWERS, ROBERT R JR 1670-B EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003 US	
	e named entity submits this statement for the purpo e of Florida.	se of changing its	registered office or registered agent, or both,	
SIGNATURE: ROBERT R. POWERS, JR.			05/03/2007	
	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CH	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	PMGR () Delete POWERS, ROBERT R JR 1680-A EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003	Name: F Address: 1	PMGR (X) Change ( ) Addition POWERS, ROBERT R JR 670-B EAGLE HARBOR PARKWAY DRANGE PARK, FL 32003	
Title: Name: Address: City-St-Zip:	VP ( ) Delete STANKARD, CHARLES MD 1680-A EAGLE HARBOR PARKWAY ORANGE PARK, FL 32003	Name: S Address: 1	MGVP (X) Change ( ) Addition STANKARD, CHARLES E MD 670-B EAGLE HARBOR PARKWAY DRANGE PARK, FL 32003	
Title: Name: Address: City-St-Zip:	()Delete	Name: 0 Address: 1	MGRM () Change (X) Addition GILLIGAN, MICHAEL S 670-B EAGLE HARBOR PARKWAY DRANGE PARK, FL 32003	
Title: Name: Address: City-St-Zip:	( ) Delete	Name: 0 Address: 1	AGRM ( ) Change (X) Addition GROOVER, JACK 670-B EAGLE HARBOR PARKWAY DRANGE PARK, FL 32003	
Title: Name: Address: City-St-Zip:	( ) Delete	Name: S Address: 1	/IGRM ( ) Change (X) Addition SHAH, ARJAV 670-B EAGLE HARBOR PARKWAY DRANGE PARK, FL 32003	

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: ROBERT R. POWERS, JR. MGRM 05/03/2007