

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069721

FILED
Jan 26, 2011
Secretary of State

Entity Name: RIVERWALK ANESTHESIA, LLC

Current Principal Place of Business:

6241 ARC WAY
FT. MYERS, FL 33966

New Principal Place of Business:

Current Mailing Address:

6241 ARC WAY
FT. MYERS, FL 33966

New Mailing Address:

FEI Number: 20-3153133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAIRES, GREG
CHAIRE & HAMMOND
283 CRANES ROOST BLVD#165
ALTAMONTE SPRINGS, FL 32701 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: MGR
Name: DIGBY, VICKI
Address: 5463 HARBORE CASTLE DR
City-St-Zip: FORT MYERS, FL 33907

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 Statutes.

SIGNATURE: VICKI DIGBY

MGR

01/26/2011

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