

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106610

FILED
Mar 14, 2011
Secretary of State

Entity Name: TWIN OAKS ANESTHESIA SERVICES, L.L.C.

Current Principal Place of Business:

26714 WINGED ELM DRIVE
WESLEY CHAPEL, FL 33544

New Principal Place of Business:

Current Mailing Address:

26714 WINGED ELM DRIVE
WESLEY CHAPEL, FL 33544

New Mailing Address:

FEI Number: 20-3728972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLINE, DEANNA L CRNA
26714 WINGED ELM DRIVE
WESLEY CHAPEL, FL 33544 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: VP
Name: KLINE, JONATHAN P CRNA
Address: 26714 WINGED ELM DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: P
Name: KLINE, DEANNA L CRNA
Address: 26714 WINGED ELM DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544

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: DEANNA L KLINE

PRES

03/14/2011

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