## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000109974

Entity Name: SURGICAL SPECIALTY, LLC

Apr 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

201 N. FRANKLIN STREET STE 2000 TAMPA, FL 33602

**Current Mailing Address: New Mailing Address:** 

201 N. FRANKLIN STREET STE 2000 TAMPA, FL 33602

FEI Number: 20-3789274 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOODWIN, JAMES W 201 N. FRANKLIN STREET STE 2000 TAMPA, FL 33602

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:

Name:

Electronic Signature of Registered Agent Date

Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change () Addition

MIGHELL, MARK A Address: 201 N. FRANKLIN STREET SUITE 2000 Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: MGR ( ) Delete Title: () Change () Addition

Name: MIGHELL, SASKIA V Name: Address: 201 N. FRANKLIN STREET SUITE 2000 Address: City-St-Zip: TAMPA, FL 33602 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: MARK MIGHELL 04/25/2007