

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015274

FILED
Apr 18, 2011
Secretary of State

Entity Name: GOSINE ANESTHESIA SERVICES LLC

Current Principal Place of Business:

11314 GEORGETOWN CIRCLE
TAMPA, FL 33635 US

New Principal Place of Business:

Current Mailing Address:

11314 GEORGETOWN CIRCLE
TAMPA, FL 33635 US

New Mailing Address:

FEI Number: 20-4336329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOSINE, RAMA R
11314 GEORGETOWN CIRCLE
TAMPA, FL 33635 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: GOSINE, RAMA
Address: 11314 GEORGETOWN CIRCLE
City-St-Zip: TAMPA, FL 33635 US

Title: SEC.
Name: GOSINE, DONNA
Address: 11314 GEORGETOWN CIR
City-St-Zip: TAMPA, FL 33635 US

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: RAMA GOSINE

MGR

04/18/2011

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