

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044584

FILED
Jul 15, 2008
Secretary of State

Entity Name: ASSOCIATION OF MINIMALLY INVASIVE GYNECOLOGIC SURGEONS, LLC

Current Principal Place of Business:

8740 N KENDALL DRIVE, STE. 101
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

8740 N KENDALL DRIVE, STE. 101
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 75-3214858 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITTED, RAYMOND W
8740 N KENDALL DRIVE
101
MIAMI, FL 33176 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: MGRM () Delete
Name: WHITTED, RAYMOND W
Address: 8740 N KENDALL DRIVE, STE. 101
City-St-Zip: MIAMI, FL 33176 US

Title: MGRM () Delete
Name: PRIETO, PAUL
Address: 8740 N KENDALL DRIVE, STE. 101
City-St-Zip: MIAMI, FL 33176 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RAYMOND W WHITTED

MGRM

07/15/2008

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