

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059096

FILED
Jun 17, 2010
Secretary of State

Entity Name: ASC ANESTHESIA SERVICES, L.L.C.

Current Principal Place of Business:

6717 NW 11TH PLACE STE A
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

6717 NW 11TH PLACE STE A
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 20-5031256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELL, CARLA
6717 NW 11TH PLACE STE A
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

CATLIN, JEFFREY R MD
6717 NW 11TH PLACE STE A
GAINESVILLE, FL 32605 US

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: JEFFREY R CATLIN, MD

06/17/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SNODGRASS, GREGORY D MD
Address: 708 E UNIVERSITY AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: MGR
Name: BALCH, KYLE MD
Address: 6717 NW 11TH PL STE A
City-St-Zip: GAINESVILLE, FL 32605

Title: MGR
Name: CATLIN, JEFFREY R MD
Address: 6717 NW 11TH PLACE STE A
City-St-Zip: GAINESVILLE, FL 32605

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: JEFFREY CATLIN, MD

MGR

06/17/2010

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