

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061555

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: PREMIER ENDOSCOPY CENTER, LLC

## Current Principal Place of Business:

1656 MEDICAL BLVD., SUITE 303  
NAPLES, FL 34110

## New Principal Place of Business:

1656 MEDICAL BLVD  
201  
NAPLES, FL 34110

## Current Mailing Address:

1656 MEDICAL BLVD., SUITE 303  
301  
NAPLES, FL 34110

## New Mailing Address:

1656 MEDICAL BLVD  
201  
NAPLES, FL 34110

FEI Number: 20-5055187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MECKSTROTH, STEVEN A  
1656 MEDICAL BLVD STE 301  
NAPLES, FL 34110 US

## Name and Address of New Registered Agent:

MECKSTROTH, STEVEN A  
1656 MEDICAL BLVD  
201  
NAPLES, FL 34110 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: STEVEN MECKSTROTH

01/23/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MECKWSTROTH, STEVEN  
Address: 1656 MEDICAL BLVD STE 301  
City-St-Zip: NAPLES, FL 34110

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MECKSTROTH, STEVEN A  
Address: 1656 MEDICAL BLVD STE 201  
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Change (X) Addition  
Name: WINZENRIED, GUY  
Address: 1656 MEDICAL BLVD STE 201  
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Change (X) Addition  
Name: WIESEN, SCOTT  
Address: 1656 MEDICAL BLVD STE 201  
City-St-Zip: NAPLES, FL 34110

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: STEVEN MECKSTROTH

MGR

01/23/2009

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