

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118443

FILED
May 06, 2009
Secretary of State

Entity Name: ANESTHESIOLOGY ASSOCIATES OF THE GULF COAST, LLC

Current Principal Place of Business:

6015 POINTE WEST BLVD
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

3116 WEST HARBOR VIEW AVENUE
TAMPA, FL 33611 US

New Mailing Address:

FEI Number: 20-8033980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEEDHAM, JIM CEO
6015 POINTE WEST BLVD
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

NEEDHAM, JIM CEO
6015 POINTE WEST BLVD
BRADENTON, FL 34209 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:

05/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CRNA () Delete
Name: HERN, DEDRA L CRNA
Address: 3116 W HARBOR VIEW AVE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES:

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: MARCIA BATES

CONT

05/06/2009

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