

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000014153

FILED
Feb 27, 2012
Secretary of State

Entity Name: NATURE COAST UROLOGY, LLC

Current Principal Place of Business:

10441 QUALITY DRIVE, SUITE #205
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

10441 QUALITY DRIVE, SUITE #205
SPRING HILL, FL 34609

New Mailing Address:

FEI Number: 20-8404286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHONWALD, DENISE
10441 QUALITY DRIVE
SUITE 205
SPRING HILL, FL 34609 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
Name: SCHONWALD, HARVEY N M.D.
Address: 10441 QUALITY DRIVE, SUITE #205
City-St-Zip: SPRING HILL, FL 34609

Title: MGR
Name: SCHONWALD, DENISE
Address: 10441 QUALITY DRIVE, SUITE #205
City-St-Zip: SPRING HILL, FL 34609

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: DENISE SCHONWALD

MGR

02/27/2012

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