

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049156

FILED
Jan 14, 2008
Secretary of State

Entity Name: FLORIDA LAKES SURGICAL, PLLC

Current Principal Place of Business:

3750 EMERGENCY LANE
SUITE 3
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

3750 EMERGENCY LANE
SUITE 3
SEBRING, FL 33870

New Mailing Address:

FEI Number: 20-8995750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, TODD
7785 BAYMEADOWS WAY SUITE 107
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

LACKEY, THOMAS C II
3750 EMERGENCY LANE
SUITE 3
SEBRING, FL 33870 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: T.C. LACKEY, II

01/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LACKEY, THOMAS CARROLL II
Address: 3750 EMERGENCY LANE
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LACKEY, THOMAS CARROLL C II
Address: 3750 EMERGENCY LANE
City-St-Zip: SEBRING, FL 33870

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: T.C. LACKEY, II

MGR

01/14/2008

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