

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000056898

FILED  
Jul 10, 2008  
Secretary of State

Entity Name: SURGERY PARTNERS OF PARK PLACE, LLC

**Current Principal Place of Business:**

5501 WEST GRAY STREET  
TAMPA, FL 33609

**New Principal Place of Business:**

5501 W. GRAY STREET  
TAMPA, FL 33609 US

**Current Mailing Address:**

5501 WEST GRAY STREET  
TAMPA, FL 33609

**New Mailing Address:**

5501 W. GRAY STREET  
TAMPA, FL 33609 US

FEI Number: 26-0260257      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

**ADDITIONS/CHANGES:**

Title: PCEO ( ) Change (X) Addition  
Name: GARI, RODOLFO JR  
Address: 5501 W. GRAY STREET  
City-St-Zip: TAMPA, FL 33609 US

Title: COO ( ) Change (X) Addition  
Name: DOYLE, MICHAEL  
Address: 5501 W. GRAY STREET  
City-St-Zip: TAMPA, FL 33609 US

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: MICHAEL DOYLE

COO

07/10/2008

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