2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 10, 2008
Secretary of State

DOCUMENT# L07000077566

Entity Name: SURGERY PARTNERS OF BRANDON, 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: 26-0613130 **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: CEOP ( ) Delete
Name: GARI, RODOLFO JR
Address: 5501 WEST GRAY STREET
City-St-Zip: TAMPA, FL 33609

Title: COO ( ) Delete
Name: DOYLE, MICHAEL
Address: 5501 WEST GRAY STREET
City-St-Zip: TAMPA, FL 33609

Title: COF (X) Delete
Name: LOWE, SCOTT
Address: 5501 WEST GRAY STREET
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

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

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

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: MICHAEL DOYLE COO 07/10/2008

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