2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2010
Secretary of State

DOCUMENT# L07000097598

Entity Name: ANESTHESIA ASSOCIATES OF CAPE CORAL, LLC

Current Principal Place of Business:

1806 MONTE VISTA ST
FT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

1806 MONTE VISTA ST
FT MYERS, FL 33901

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'MAILIA, CHERYL A
1806 MONTE VISTA ST
FT MYERS, FL 33901 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: P
Name: O'MAILIA, JAMES J MD
Address: 1806 MONTE VISTA STREET
City-St-Zip: FORT MYERS, FL 33901

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 Statues.

SIGNATURE: JAMES J O'MAILIA, MD P 02/01/2010

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