2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 05, 2008
Secretary of State

DOCUMENT# L07000104286

Entity Name: FLORIDA ADVANCED CARDIOTHORACIC SURGERY LLC

Current Principal Place of Business:

4 COLUMBIA DRIVE
SUITE 870
TAMPA, FL 33606

New Principal Place of Business:

4 COLUMBIA DRIVE
SUITE 820
TAMPA, FL 33606

Current Mailing Address:

4 COLUMBIA DRIVE
SUITE 870
TAMPA, FL 33606

New Mailing Address:

4 COLUMBIA DRIVE
SUITE 820
TAMPA, FL 33606

FEI Number: 14-2010042 **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:

AEBEL, ERIN
101 EAST KENNEDY BLVD.
SUITE 2800
TAMPA, FL 33606 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:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: CALDEIRA, CHRISTIANO MD
Address: 4 COLUMBIA DRIVE, SUITE 820
City-St-Zip: TAMPA, FL 33606

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: CHRISTIANO CALDEIRA MGRM 08/05/2008

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