

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127669

FILED
May 01, 2010
Secretary of State

Entity Name: SOUTHEAST ANESTHESIA AND PAIN MEDICINE, LLC

Current Principal Place of Business:

5651 GULF DR
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

1110 NIKKI VIEW DR
BRANDON, FL 33511

Current Mailing Address:

P O BOX 158
LUTZ, FL 33548

New Mailing Address:

FEI Number: 26-1671115 **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:

ZHU, HUI
5651 GULF DR
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

ZHU, HUI
1110 NIKKI VIEW DRIVE
BRANDON, FL 33511 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: HUI ZHU

05/01/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ZHU, HUI MD
Address: P. O. BOX 158
City-St-Zip: LUTZ, FL 33548

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 Statutes.

SIGNATURE: HUI ZHU

MGRM

05/01/2010

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