

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034622

FILED
Feb 04, 2010
Secretary of State

Entity Name: FLORIDA OUTPATIENT MANAGEMENT GROUP, LLC

Current Principal Place of Business:

661 EAST ALTAMONTE DRIVE
SUITE 323
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

661 EAST ALTAMONTE DRIVE
SUITE 323
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

FEI Number: 26-2376049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRYAR, JEFFREY M.D.
661 EAST ALTAMONTE DRIVE
SUITE 323
ALTAMONTE SPRINGS, FL 32701 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: MGRM
Name: CRYAR, JEFFREY M.D.
Address: 661 EAST ALTAMONTE DRIVE, STE. 323
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

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: JEFFREY CRYAR MD

MGRM

02/04/2010

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