

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000038207

FILED
Jan 18, 2010
Secretary of State

Entity Name: SURGERY CENTER OF MOUNT DORA, LLC

Current Principal Place of Business:

3710 LAKE CENTER DR
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

4 WESTBROOK CORPORATE CENTER
STE 440
WESTCHESTER, IL 60154

New Mailing Address:

3710 LAKE CENTER DR
MOUNT DORA, FL 32757

FEI Number: 26-2446297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHIRLEY, THOMAS
3710 LAKE CENTER DR
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

THOMAS, SHIRLEY A ADMINIS
3710 LAKE CENTER DR
MOUNT DORA, FL 32757 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: SHIRLEY A. THOMAS, ADMINISTRATOR

01/18/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BJERKEN, DAVID M.D.
Address: PO BOX 547
City-St-Zip: TAVARES, FL 32778

Title: MGR
Name: CASSELL, JACK M.D.
Address: 18526 COUNTY ROAD 44A
City-St-Zip: EUSTIS, FL 32726

Title: MGR
Name: GURU, SAMIR M.D.
Address: 1227 LAKE WHITNEY DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: MGR
Name: MASCARENHAS, BORYS M.D.
Address: 5012 GREENBRIAR TRAIL
City-St-Zip: MOUNT DORA, FL 327579100

Title: MGR
Name: JOYCE, DENO
Address: 4 WESTBROOK CORP CTR #440
City-St-Zip: WESTCHESTER, IL 60154

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: SHIRLEY A. THOMAS

ADM.

01/18/2010

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