

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000079373

FILED
Apr 17, 2009
Secretary of State

Entity Name: SURGICAL TRIP, LLC

Current Principal Place of Business:

7491 NORTH FEDERAL HIGHWAY SUITE C-5 293
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

7491 NORTH FEDERAL HIGHWAY SUITE C-5 293
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 26-3830564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK, BRAD
7491 NORTH FEDERAL HIGHWAY SUITE C-5 293
BOCA RATON, FL 33487 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 () Delete
Name: O'HARA, TOM
Address: 150 NORTH RADNOR CHESTER ROAD SUITE F100
City-St-Zip: RADNOR, PA 19087

Title: COO () Delete
Name: COOK, BRAD
Address: 7491 NORTH FEDERAL HIGHWAY SUITE C-5 293
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS O'HARA

PRES

04/17/2009

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