

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083179

FILED
Apr 13, 2011
Secretary of State

Entity Name: ADVANCED SURGERY CENTER OF PALM BEACH COUNTY, LLC

Current Principal Place of Business:

5065 SR 7
SUITE 101
LAKE WORTH, FL 33449

New Principal Place of Business:

Current Mailing Address:

5065 SR 7
SUITE 101
LAKE WORTH, FL 33449

New Mailing Address:

FEI Number: 26-2830080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAMER, CHARLES W
1411 EDGEWATER DRIVE
SUITE 200
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

TALBOTT, MADELEINE C
5065 SR 7
SUITE 201
LAKE WORTH, FL 33449 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: MADELEINE C TALBOTT

04/13/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: EISENMAN, JESSE
Address: 12989 SOUTHERN BLVD., SUITE 202
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM
Name: EISENMAN, RICHARD
Address: 12989 SOUTHERN BLVD., SUITE 202
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MNG
Name: TALBOTT, MADELEINE C
Address: 5065 SR 7
City-St-Zip: LAKE WORTH, FL 33449

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: MADELEINE TALBOTT

MNG

04/13/2011

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