

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000094711

FILED
Aug 20, 2009
Secretary of State

Entity Name: SUNSHINE STATE ANESTHESIA ASSOCIATES, P.L.

Current Principal Place of Business:

201 NOLAND DRIVE
SUITE A
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

201 NOLAND DRIVE
SUITE A
BRANDON, FL 33511 US

New Mailing Address:

26091 MOUNTAIN LAKE ROAD
BROOKSVILLE, FL 34602 US

FEI Number: 26-3492428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

LASMAN, JEFFREY M
6152 DELANCEY STATION STREET
SUITE 205
RIVERVIEW, FL 33578 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SIDHOM, GEORGE S M.D.
Address: 201 NOLAND DRIVE, SUITE A
City-St-Zip: BRANDON, FL 33511 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SIDHOM, GEORGE S M.D.
Address: 26091 MOUNTAIN LAKE ROAD
City-St-Zip: BROOKSVILLE, FL 34602 US

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: GEORGE S. SIDHOM, MD

MGRM

08/20/2009

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