

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000047294

**FILED
Mar 21, 2012
Secretary of State**

Entity Name: SURGICAL ASSOCIATES OF BREVARD LLC

Current Principal Place of Business:

1116 GEIGER STREET
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1116 GEIGER STREET
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 27-0192478 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHF FAMILY PHYSICIANS, INC
1116 GEIGER STREET
ROCKLEDGE, FL 32955 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: SCHF FAMILY PHYSICIANS INC
Address: 1116 GEIGER STREET
City-St-Zip: ROCKLEDGE, FL 32955

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: FRAN PICKETT

C

03/21/2012

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