

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000085383

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** SURGI CENTERS OF PINELLAS, LLC

**Current Principal Place of Business:**

1146 SKYE LANE  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 338  
PALM HARBOR, FL 34682

**New Mailing Address:**

**FEI Number:** 27-2251498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COATS, JON B JR.  
5022 73RD AVENUE  
PINELLAS PARK, FL 33781 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: MILLER, LAWRENCE C  
Address: 1146 SKYE LANE  
City-St-Zip: PALM HARBOR, FL 34683

Title: MGRM  
Name: MILLER, MICHELE  
Address: 1146 SKYE LANE  
City-St-Zip: PALM HARBOR, FL 34683

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: LAWRENCE C MILLER

MGRM

04/28/2010

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