

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000087965

FILED
Aug 04, 2010
Secretary of State

Entity Name: BAPTIST MEDICAL GROUP ORTHOPEDIC PRACTICE, LLC

Current Principal Place of Business:

1717 NORTH E STREET, SUITE 320
PENSACOLA, FL 32501

New Principal Place of Business:

1717 NORTH E STREET, SUITE 320
ATTN: MARY MATHEWS
PENSACOLA, FL 32501

Current Mailing Address:

1717 NORTH E STREET, SUITE 320
PENSACOLA, FL 32501

New Mailing Address:

1717 NORTH E STREET, SUITE 320
ATTN: MARY MATHEWS
PENSACOLA, FL 32501

FEI Number: 27-0950931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEGGS & LANE, A REGISTERED LLP
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 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: MRG
Name: VERMILLION, KERRY W
Address: 1717 NORTH E STREET, STE. 320
City-St-Zip: PENSACOLA, FL 32501

Title: MGR
Name: SKOLROOD, KENT
Address: 1717 NORTH E STREET, STE. 320
City-St-Zip: PENSACOLA, FL 32501

Title: MRG
Name: FAULKNER, MARK T
Address: 1717 NORTH E STREET, STE. 320
City-St-Zip: PENSACOLA, FL 32501

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: MARY MATHEWS

AS

08/04/2010

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