

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000089424

FILED
Feb 15, 2011
Secretary of State

Entity Name: THE BREVARD SPECIALTY SURGERY CENTER, LLC

Current Principal Place of Business:

95 BULLDOG BLVD., SUITE 104
MELBOURNE, FL 329013175

New Principal Place of Business:

Current Mailing Address:

95 BULLDOG BLVD., SUITE 104
MELBOURNE, FL 329013175

New Mailing Address:

FEI Number: 27-0920146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: OLINDE, JOHN M.D.
Address: 1344 S. APOLLO BLVD., SUITE D
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM
Name: KOMAR, ALEKSANDER M.D.
Address: 2200 W. EAU GALLIE BLVD., SUITE 202-B
City-St-Zip: MELBOURNE, FL 32935

Title: MGRM
Name: MALIS, DAVID M.D.
Address: 1499 S. HARBOR CITY BLVD., SUITE 303
City-St-Zip: MELBOURNE, FL 32901

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: JOHN OLINDE

MGRM

02/15/2011

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