

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000099133

Entity Name: AVALON ANESTHESIA PLLC

FILED
Apr 02, 2012
Secretary of State

Current Principal Place of Business:

1417 SADLER ROAD, #348
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

1417 SADLER ROAD, #348
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 27-1166138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFRIES, MAGGIE ANN
1417 SADLER ROAD, #348
FERNANDINA BEACH, FL 32034 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: JEFFRIES, MAGGIE ANN
Address: 1417 SADLER ROAD, #348
City-St-Zip: FERNANDINA BEACH, FL 32034

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: MAGGIE ANN JEFFRIES

MGRM

04/02/2012

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