2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2010
Secretary of State

DOCUMENT# L09000112377

Entity Name: ALLIANCE SURGICAL CENTER, LLC

Current Principal Place of Business:

917 RINEHART ROAD, SUITE 1001
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

917 RINEHART ROAD, SUITE 1001
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MUNI, ANNA
917 RINEHART ROAD, SUITE 1001
LAKE MARY, FL 32746 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: DR.
Name: NAVARRO, FELIX A JR
Address: 917 RINEHART ROAD
City-St-Zip: LAKE MARY, FL 32746

Title: DR.
Name: ROBERTSON, JOHN JR
Address: 4106 WEST LAKE MARY BOULEVARD
City-St-Zip: LAKE MARY, FL 32746

Title: DR.
Name: CANGIANO, THOMAS
Address: SUITE 1008, 270 SOUTH NORTHLAKE BOULEVARD
City-St-Zip: ALTOMONTE SPRINGS, FL 32701

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 Statues.

SIGNATURE: FELIX A. NAVARRO, JR., MD, MANAGING MEMBER DR. 05/03/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date