

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000113360

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** ANESTHESIA PARTNERS OF MANATEE, LLC

**Current Principal Place of Business:**

6015 POINTE WEST BLVD  
BRADENTON, FL 34209

**New Principal Place of Business:**

**Current Mailing Address:**

6015 POINTE WEST BLVD  
BRADENTON, FL 34209

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, JOHN L  
200 SOUTH ORNAGE AVE  
SARASOTA, FL 34236 US

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

BLALOCK, WALTERS, HELD & JOHNSON, P.A.  
802 11TH STREET WEST  
BRADENTON, FL 34205 US

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: JONATHAN D. FLEECE

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FARINO, GREGORY L MD  
Address: 6015 POINTE WEST BLVD  
City-St-Zip: BRADENTON, FL 34209

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: GREGORY L FARINO, MD

MGR

04/30/2010

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