

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000108359

FILED
Apr 01, 2011
Secretary of State

Entity Name: STONYBROOK ANESTHESIA, LLC

Current Principal Place of Business:

145 WASHINGTON ST
ST AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

145 WASHINGTON ST
ST AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 27-3694756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLAIN, ROSALIE J
145 WASHINGTON ST
ST AUGUSTINE, FL 32084 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: MGR
Name: MCCLAIN, ROSALIE J
Address: 145 WASHINGTON ST
City-St-Zip: ST AUGUSTINE, FL 32084 US

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: ROSALIE MCCLAIN

MS.

04/01/2011

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