

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000000106

FILED
Feb 29, 2012
Secretary of State

Entity Name: CC ANESTHESIA SERVICES, L.L.C.

Current Principal Place of Business:

4964 STONELEIGH PLACE
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

4964 STONELEIGH PLACE
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 27-4535345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756 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: CAVALIERE, CHARLES E SR.
Address: 4964 STONELEIGH PLACE
City-St-Zip: OLDSMAR, FL 34677

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: CHARLES E. CAVALIERE, SR.

MGR

02/29/2012

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