2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: OUTSTANDING ANESTHESIA RELIEF SERVICES, LLC

Current Principal Place of Business:

1891 OSPREY BLUFF BOULEVARD
FLEMING ISLAND, FL 32003 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 9775
FLEMING ISLAND, FL 32006 US

New Mailing Address:

FEI Number: 80-0737467 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE FARAH LAW GROUP
1506 PRUDENTIAL DRIVE
2ND FLOOR
JACKSONVILLE, FL 32207 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: WALTERS, LYNDA E
Address: 1891 OSPREY BLUFF BOULEVARD
City-St-Zip: FLEMING ISLAND, FL 32003

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: LYNDA WALTERS /JEF MGRM 01/05/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date