

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005696

**FILED**  
**Jan 28, 2009**  
**Secretary of State**

**Entity Name:** GULF COAST ENDOSCOPY CENTER OF VENICE, LLC

**Current Principal Place of Business:**

1220 E. VENICE AVENUE  
VENICE, FL 342922151

**New Principal Place of Business:**

1220 E. VENICE AVENUE  
VENICE, FL 34285

**Current Mailing Address:**

1220 E. VENICE AVENUE  
VENICE, FL 342922151

**New Mailing Address:**

1220 E. VENICE AVENUE  
VENICE, FL 34285

**FEI Number:** 65-0954372

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELMAN, ROBERT H M.D.  
1215 JACARANDA BLVD.  
VENICE, FL 34292 US

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

FELMAN, ROBERT H M.D.  
1041 RIDGEWOOD AVE  
VENICE, FL 34285 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: ROBERT FELMAN

01/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GROSSBARD, HOWARD M.D.  
Address: 241 NOKOMIS AVE. S.  
City-St-Zip: VENICE, FL 34285

Title: MGR ( ) Delete  
Name: DEMASI, RON M.D.  
Address: 232 ST. JAMES PARK  
City-St-Zip: OSPREY, FL 34229

Title: MGR ( ) Delete  
Name: RAJA, JAY M.D.  
Address: 7290 MAHASUTA KEY ROAD  
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGR ( ) Delete  
Name: FELMAN, ROBERT M.D.  
Address: 1215 JACARANDA BLVD  
City-St-Zip: VENICE, FL 34292

Title: MGR ( ) Delete  
Name: KONDAPALLI, RAVI M.D.  
Address: 7945 MEADOWRUSH LOOP  
City-St-Zip: SARASOTA, FL 34238

Title: MGR ( ) Delete  
Name: DUMAS, PETER M.D.  
Address: 1215 JACARANDA BLVD.  
City-St-Zip: VENICE, FL 34292

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GROSSBARD, HOWARD M.D.  
Address: 1041 RIDGEWOOD AVE  
City-St-Zip: VENICE, FL 34285

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: RAJA, JAY M.D.  
Address: 7290 MANASOTA KEY ROAD  
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGR (X) Change ( ) Addition  
Name: FELMAN, ROBERT M.D.  
Address: 1041 RIDGEWOOD AVE  
City-St-Zip: VENICE, FL 34285

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: PETER DUMAS

MGR

01/28/2009

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