

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000120

FILED
Jan 05, 2012
Secretary of State

Entity Name: THE OCALA ENDOSCOPY ANESTHESIA, LLC

Current Principal Place of Business:

6241 ARC WAY
FT MYERS, FL 33966

New Principal Place of Business:

Current Mailing Address:

6241 ARC WAY
FT MYERS, FL 33966

New Mailing Address:

FEI Number: 80-0007551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIGBY, EMILIE V
6241 ARC WAY
FT MYERS, FL 33966 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: DIGBY, EMILIE V
Address: 6241 ARC WAY
City-St-Zip: FT MYERS, FL 33966

Title: MGR
Name: DIGBY, SEAN
Address: 6241 ARC WAY
City-St-Zip: FT MYERS, FL 33966

Title: MGR
Name: VANELDIK, RICHARD MD
Address: 1160 SE 18TH PLACE
City-St-Zip: OCALA, FL 34417

Title: MGR
Name: EMERSON, BILL
Address: 1160 SE 18TH PLACE
City-St-Zip: OCALA, FL 34417

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: EMILIE DIGBY

MGR

01/05/2012

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