

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M03000000639

FILED
Mar 24, 2006
Secretary of State

Entity Name: COMMERCIAL RE PARTNERS XVI-ST. PETERSBURG SURGERY CENTER, L.L.C.

Current Principal Place of Business:

15500 LIGHTWAVE DRIVE, SUITE 100
CLEARWATER, FL 33760

New Principal Place of Business:

1750 SOUTH BRENTWOOD BOULEVARD
SUITE 701
SAINT LOUIS, MO 63144

Current Mailing Address:

15500 LIGHTWAVE DRIVE, SUITE 100
CLEARWATER, FL 33760

New Mailing Address:

1750 SOUTH BRENTWOOD BOULEVARD
SUITE 701
SAINT LOUIS, MO 63144

FEI Number: 41-2079109 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: JOHN J LINNIHAN, ASST. VICE PRESIDENT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOLSTE, STEPHEN F
Address: 1750 S BRENTWOOD BLVD., SUITE 701
City-St-Zip: ST. LOUIS, MO 63144

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN F HOLSTE

MGR

03/24/2006

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