

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001419

FILED
Jan 06, 2010
Secretary of State

Entity Name: ULTIMATE ANESTHESIOLOGY LLC

Current Principal Place of Business:

4178 N. ARMENIA AVE.
TAMPA, FL 33607

New Principal Place of Business:

4178 N. ARMENIA AVE.
TAMPA, FL 336076429

Current Mailing Address:

4178 N. ARMENIA AVE.
TAMPA, FL 33607

New Mailing Address:

4178 N. ARMENIA AVE.
TAMPA, FL 336076429

FEI Number: 41-2082313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROMM, JOSEPH EA
4178 N ARMENIA AVE
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

BROMM, JOSEPH EA
4178 N ARMENIA AVE
TAMPA, FL 336076429 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: _____

01/06/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BARSА, CINDY D
Address: 4178 N. ARMENIA AVE.
City-St-Zip: TAMPA, FL 33607

Title: MGR
Name: BARSА, JOHN E MD
Address: 4178 N. ARMENIA AVE.
City-St-Zip: TAMPA, FL 33607

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: JOHN E BARSА MD

MGR

01/06/2010

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