

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M03000002260

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** THE TAMPA FL ENDOSCOPY ASC, LLC

**Current Principal Place of Business:**

20 BURTON HILLS BLVD., 5TH FLOOR  
NASHVILLE, TN 32715

**New Principal Place of Business:**

**Current Mailing Address:**

20 BURTON HILLS BLVD., 5TH FLOOR  
NASHVILLE, TN 32715

**New Mailing Address:**

**FEI Number:** 20-0073189

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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:** AMSURG HOLDINGS, INC.  
**Address:** 20 BURTON HILLS BLVD., 5TH FLOOR  
**City-St-Zip:** NASHVILLE, TN 32715

**Title:** MGRM  
**Name:** ENDOSCOPY ASSOC. OF TAMPA BAY, LLC  
**Address:** 15504 THORNHURST CT  
**City-St-Zip:** TAMPA, FL 33647

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:** CLAIRE GULMI

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02/18/2010

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