

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000786

FILED
May 17, 2010
Secretary of State

Entity Name: MORTON PLANT GAMMA KNIFE, L.L.C.

Current Principal Place of Business:

5351 E. THOMPSON ROAD
#257
INDIANAPOLIS, IN 46237 US

New Principal Place of Business:

300 PINELLAS STREET
CLEARWATER, FL 33756 US

Current Mailing Address:

5351 E. THOMPSON ROAD
#257
INDIANAPOLIS, IN 46237 US

New Mailing Address:

300 PINELLAS STREET
CLEARWATER, FL 33756 US

FEI Number: 20-1063721 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

MARQUARDT, EMIL C JR ESQ
INTERVEST BANK BUILDING
625 COURT STREET, SUITE 200
CLEARWATER, FL 33756 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MORTON PLANT HOSPITAL ASSOCIATION, INC.
Address: 300 PINELLAS STREET
City-St-Zip: CLEARWATER, FL 33756 US

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: GLENN WATERS, AS PRESIDENT & ASSIST. SECY. MGRM 05/17/2010

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