

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004655

**FILED
Apr 14, 2011
Secretary of State**

Entity Name: DSC ANESTHESIA, LLC

Current Principal Place of Business:

40 BURTON HILLS BLVD STE 500
NASHVILLE, TN 37215

New Principal Place of Business:

Current Mailing Address:

40 BURTON HILLS BLVD STE 500
NASHVILLE, TN 37215

New Mailing Address:

FEI Number: 20-5384672 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CT 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ORANGE CITY SURGICAL, LLC
Address: 40 BURTON HILLS BLVD STE 500
City-St-Zip: NASHVILLE, TN 37215

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: TERESA SPARKS

VP

04/14/2011

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