2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2010
Secretary of State

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Entity Name: SURGICAL ASSIST MANAGEMENT, LLC

Current Principal Place of Business:

2445 SE 8TH AVENUE
POMPANO BEACH, FL 33062

New Principal Place of Business:

3100 WEST END AVENUE, SUITE 800
NASHVILLE, TN 37203

Current Mailing Address:

2445 SE 8TH AVENUE
POMPANO BEACH, FL 33062

New Mailing Address:

3100 WEST END AVENUE, SUITE 800
NASHVILLE, TN 37203

FEI Number: 71-1025235 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: D
Name: GRAY, JOHN T
Address: 3100 WEST END AVENUE, SUITE 800
City-St-Zip: NASHVILLE, TN 37203

Title: D
Name: BRUKARDT, GARY A
Address: 3100 WEST END AVENUE, SUITE 800
City-St-Zip: NASHVILLE, TN 37203

Title: D
Name: LORDEMAN, JAMES C
Address: 3100 WEST END AVENUE, SUITE 800
City-St-Zip: NASHVILLE, TN 37203

Title: D
Name: MAULDIN, J. MICHAEL
Address: 3100 WEST END AVENUE, SUITE 800
City-St-Zip: NASHVILLE, TN 37203

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 Statues.

SIGNATURE: JOHN T. GRAY D 04/05/2010

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