2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2013
Secretary of State
CC6440326862

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Entity Name: ORANGE CITY SURGERY CENTER, LLC

Current Principal Place of Business:

975 TOWN CENTER DRIVE
SUITE 100
ORANGE CITY, FL 32763

Current Mailing Address:

5501 W. GRAY ST.
TAMPA, FL 33609

FEI Number: 59-3831266

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Authorized Person(s) Detail :

Title	CEO
Name	DOYLE, MICHAEL
Address	5501 W. GRAY ST.
City-State-Zip:	TAMPA FL 33609

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL DOYLE CEO 04/17/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date