

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051311

Entity Name: SURGICAL SPECIALISTS OF ST. LUCIE COUNTY, LLC

Current Principal Place of Business:

6830 US HIGHWAY 1
PORT ST. LUCIE, FL 34952

Current Mailing Address:

6830 US HIGHWAY 1
PORT ST. LUCIE, FL 34952 US

FEI Number: 26-0176703

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SLACK, CHRISTOPHER L
4632 S 25TH ST
FORT PIERCE, FL 34981 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 MGR
Name SLACK, CHRISTOPHER L
Address 4632 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

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: CHRISTOPHER SLACK

MANAGER

04/13/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date