

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000007670

**Entity Name:** PREMIER SURGICAL CENTER, L.L.C.

**Current Principal Place of Business:**

2130 VINDALE ROAD  
TAVARES, FL 32778

**Current Mailing Address:**

2130 VINDALE ROAD  
TAVARES, FL 32778 US

**FEI Number: 26-1807944**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

NAGABHAIRU, LALBAHADUR S  
2130 VINDALAE RD  
TAVARES, FL 32778 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:** NAGABHAIRU, LALBAHADUR S

01/13/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name NAGABHAIRU, LALBAHADUR S M.D.  
Address 2130 VINDALE ROAD  
City-State-Zip: TAVARES FL 32778

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NAGABHAIRU, LALBAHADUR S

MANAGER

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date