

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023725

Entity Name: CITRUS PARK SURGERY CENTER, LLC

Current Principal Place of Business:

6326 GUNN HIGHWAY
TAMPA, FL 33625

Current Mailing Address:

6326 GUNN HIGHWAY
TAMPA, FL 33625

FEI Number: 26-2278332

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NUCCI, ROBERT C
6322 GUNN HIGHWAY
TAMPA, FL 33625 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 NUCCI, ROBERT C
Address 6322 GUNN HIGHWAY
City-State-Zip: TAMPA FL 33625

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: ROBERT C NUCCI

MGR

04/23/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date