2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2014
Secretary of State
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Entity Name: ALLIANCE SURGICAL CENTER, LLC

Current Principal Place of Business:

917 RINEHART ROAD, SUITE 1001
LAKE MARY, FL 32746

Current Mailing Address:

917 RINEHART ROAD, SUITE 1001
LAKE MARY, FL 32746

FEI Number: 27-1367127

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MENA, WILLIAM
917 RINEHART ROAD, SUITE 1001
LAKE MARY, FL 32746 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: WILLIAM MENA 02/11/2014

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	DR.
Name	NAVARRO, FELIX AJR
Address	917 RINEHART ROAD
City-State-Zip:	LAKE MARY FL 32746

Title	DR.
Name	ROBERTSON, JOHN JR
Address	4106 WEST LAKE MARY BOULEVARD
City-State-Zip:	LAKE MARY FL 32746

Title	DR.
Name	CANGIANO, THOMAS
Address	SUITE 1008, 270 SOUTH NORTHLAKE BOULEVARD
City-State-Zip:	ALTOMONTE SPRINGS FL 32701

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: FELIX A. NAVARRO DR 02/11/2014

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