

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000005375

Entity Name: HTA - FL ORTHO INSTITUTE ASC, LLC

Current Principal Place of Business:

16435 N SCOTTSDALE ROAD SUITE 320
SCOTTSDALE, AZ 85254

Current Mailing Address:

16435 N SCOTTSDALE ROAD SUITE 320
SCOTTSDALE, AZ 85254 US

FEI Number: 27-4134255

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MGRM
Name HEALTHCARE TRU LP
Address 16435 NORTH SCOTTSDALE ROAD
SCO
City-State-Zip: SCOTTSDALE AZ 85254

Title CFO
Name MILLIGAN, ROBERT
Address 16435 NORTH SCOTTSDALE ROAD
SCO
City-State-Zip: SCOTTSDALE AZ 85254

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: ROBERT MILLIGAN

CFO

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date