



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Limited Liability Company
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. ID No. 000164773

2. Exact Name of the Limited Liability Company Surgical Care Affiliates, LLC

3. State of Formation

State: DE

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

HOLDING COMPANY

5. Principal Office Address

No. and Street: 569 BROOKWOOD VILLAGE
SUITE 901

City or Town: BIRMINGHAM State: AL Zip: 35209 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: KINESHIA COLLINS Contact Title: CORPORATE PARALEGAL

No. and Street: 569 BROOKWOOD VILLAGE
SUITE 901

City or Town: BIRMINGHAM State: AL Zip: 35209 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	JEFFREY K RHODES	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	MICHAEL A SACHS	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	LISA SKEETE TATUM	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	SHARAD MANSUKANI MD	520 LAKE COOK ROAD SUITE 250

		DEERFIELD, IL 60015 USA
MANAGER	ANDREW P HAYEK	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	TODD B SISITSKY	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	THOMAS C GEISER	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	FREDERICK A HESSLER	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA
MANAGER	CURTIS S LANE	520 LAKE COOK ROAD SUITE 250 DEERFIELD, IL 60015 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 13 Day of September, 2015 at 3:00:36 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By RICHARD L. SHARFF, JR.
Signature of Authorized Person

Form No. 632
Revised 09/07

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