FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 FEB 14 PM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 532930 (5)

1. Corporation Name
ST. PETE ANESTHESIA ASSOCIATES, P.A.

Principal Place of Business
1201 5 AVE N STE 502
ST. PETERSBURG FL 33705

Mailing Address
P. O. BOX 22186
ST. PETERSBURG FL 33742-2186
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/28/1977
3a. Date of Last Report: 03/08/1994

2. Principal Place of Business
21: 1201 5th Avenue N.
22 Suite, Apt. #, etc.: Suite 202
23 City & State: St. Petersburg, FL.
24 Zip: 33705
25 Country: U.S.A.

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: 59-1745477 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JAMES F. O'NEILL, JR.
1201 5TH AVENUE NORTH
SUITE 502
ST. PETERSBURG FL 33705

10. Name and Address of New Registered Agent

81 Name: James F. O'Neill Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 1201 5th Avenue North
83: Suite 202
84 City: St. Petersburg FL 85 Zip Code: 33705

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: James F. O'Neill Jr. (James F. O'Neill Jr.) 2/9/95
(Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV	11 TITLE	☐ Change ☐ Addition
NAME	VALENTINE, DWIGHT D	12 NAME	
STREET ADDRESS	1201 5TH AVENUE NO. SUITE 502	13 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	14 CITY-ST-ZIP	
TITLE	DV	21 TITLE	☐ Change ☐ Addition
NAME	BROWN, WILLIAM J.	22 NAME	
STREET ADDRESS	1201 5TH AVENUE NORTH SUITE 502	23 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	24 CITY-ST-ZIP	
TITLE	DV	31 TITLE	☐ Change ☐ Addition
NAME	BROWN, FREDERICK	32 NAME	
STREET ADDRESS	1201 5TH AVENUE NORTH SUITE 502	33 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL	34 CITY-ST-ZIP	
TITLE	PTD	41 TITLE	☐ Change ☐ Addition
NAME	O'NEILL, JAMES F. JR.	42 NAME	
STREET ADDRESS	1201 5TH AVENUE NORTH SUITE 502	43 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG ,	44 CITY-ST-ZIP	
TITLE	SD	51 TITLE	☐ Change ☐ Addition
NAME	PANARO, ROBERT J.	52 NAME	
STREET ADDRESS	1201 5TH AVENUE NORTH SUITE 502	53 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	54 CITY-ST-ZIP	
TITLE	DV	61 TITLE	☐ Change ☐ Addition
NAME	LONG, WILLIAM G. JR.	62 NAME	
STREET ADDRESS	1201 5TH AVENUE NORTH SUITE 502	63 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	64 CITY-ST-ZIP	

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I/We further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James F. O'Neill Jr. (James F. O'Neill Jr.) 2/9/95 (813)-823-2188
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR (Date) (Daytime Phone Number)

0440544 FP