

2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 21, 2009
Secretary of State

DOCUMENT# P94000041969

Entity Name: THE SURGERY GROUP, P.A.

Current Principal Place of Business:

1717 NORTH E STREET
SUITE 434
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

1717 NORTH E STREET
SUITE 434
PENSACOLA, FL 32501 US

New Mailing Address:

FEI Number: 59-3256236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TYSON, JOHN W
1717 NORTH E STREET
STE 434
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

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: JOHN W. TYSON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: RUBEY, ROBERT M.D.
Address: 1717 NORTH E STREET, STE 434
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: HODNETTE, BROOKS F JR
Address: 1717 NORTH E STREET, SUITE 434
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: TUCKER, JOHN A MD
Address: 1717 NORTH E STREET, SUITE 434
City-St-Zip: PENSACOLA, FL 32501

Title: VTS () Delete
Name: CALUDA, MICHAEL J
Address: 1713 NORTH E STREET SUITE 434
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: LORD, JEFFREY
Address: 1917 NE STREET STE. 434
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: WATSON, JOHN W
Address: 1717 NW STREET STE. 434
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HODNETTE, BROOKS F JR
Address: 1717 NORTH E STREET, SUITE 434
City-St-Zip: PENSACOLA, FL 32501

Title: TRES (X) Change () Addition
Name: CALUDA, MICHAEL J MD
Address: 1717 NORTH E STREET, SUITE 434
City-St-Zip: PENSACOLA, FL 32501

Title: D (X) Change () Addition
Name: TYSON, JOHN W MD
Address: 1717 NORTH E STREET SUITE 434
City-St-Zip: PENSACOLA, FL 32501

Title: D (X) Change () Addition
Name: LORD, JEFFREY
Address: 1717 NORTH E STREET STE. 434
City-St-Zip: PENSACOLA, FL 32501

Title: D (X) Change () Addition
Name: FRIEDMAN, JEFFREY
Address: 1717 NORTH E STREET STE. 434
City-St-Zip: PENSACOLA, FL 32501

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRESSA JAMES

D

10/21/2009

Electronic Signature of Signing Officer or Director

Date