

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000006280

**Entity Name:** DAY SURGERY CARE INC.

**Current Principal Place of Business:**

6108 ARNIES WAY  
MILTON, FL 32570

**Current Mailing Address:**

6108 ARNIES WAY  
MILTON, FL 32570 US

**FEI Number: 87-4809373**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ATES, SHEILA  
6108 ARNIES WAY  
MILTON, FL 32570 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

**Officer/Director Detail :**

Title	P	Title	VP
Name	ATES, SHEILA	Name	ATES, SHEILA
Address	6108 ARNIES WAY	Address	6108 ARNIES WAY
City-State-Zip:	MILTON FL 32570	City-State-Zip:	MILTON FL 32570

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SHEILA ATES**

**PRESIDENT**

**02/20/2023**

Electronic Signature of Signing Officer/Director Detail

Date