## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39378

Entity Name: FLORIDA SOCIETY OF AMBULATORY SURGICAL CENTERS,

INC.

FILED
Jan 12, 2018
Secretary of State
CC9553911357

**Current Principal Place of Business:** 

1621 METROPOLITAN BLVD SUITE # 201

TALLAHASSEE, FL 32308

**Current Mailing Address:** 

1400 VILLAGE SQUARE BLVD.

#3-175

TALLAHASSEE, FL 32312 US

FEI Number: 59-3033878 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOHRENGEL, PETER 1400 VILLAGE SQUARE BLVD. #3-175 TALLAHASSEE, FL 32312 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:

TitlePRESIDENTTitleSECRETARYNameEPSTEIN, SAULNameHAEN, ROBERT

Address 6806 NORTH STATE RD 7 Address 10475 CENTURION PARKWAY NORTH

#101

City-State-Zip: COCONUT CREEK FL 33073

City-State-Zip: JACKSONVILLE FL 32256

Title T

NameCHRIS, MARKFORDAddress402 JEFFORDS STREETCity-State-Zip:CLEARWATER FL 33756

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.