

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39378

Entity Name: FLORIDA SOCIETY OF AMBULATORY SURGICAL CENTERS, INC.

FILED
Jan 19, 2016
Secretary of State
CC3202967618

Current Principal Place of Business:

1990 VILLAGE GREEN WAY
SUITE # 1
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 :

Title PRESIDENT
Name COURTAY, RENA
Address 10080 NW 7TH STREET
City-State-Zip: PLANTATION FL 33324

Title T
Name EARNEST, WILL
Address 24 CATHEDRAL PLACE
 SUITE 609
City-State-Zip: ST. AUGUSTINE FL 32084

Title SECRETARY
Name BRONGEL, SUE
Address 3333 CATTLEMEN RD
 SUITE 100
City-State-Zip: SARASOTA FL 34232

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: WILL EARNEST

TREASURER

01/19/2016

Electronic Signature of Signing Officer/Director Detail

Date