2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2015
Secretary of State
CC4127984689

DOCUMENT# P05000002201

Entity Name: WADE ANESTHESIA, INC.

Current Principal Place of Business:

2497 SPRUCE ST
EAST TAWAS, MI 48730

Current Mailing Address:

2497 SPRUCE STREET
EAST TAWAS, MI 48730 US

FEI Number: 16-1717569

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOGUL, JOE
151ST RIDGE WOOD AVE
HOLLY HILL, FL 32117 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	CEO
Name	WADE, WILLIAM E
Address	2497 SPRUCE ST
City-State-Zip:	EAST TAWAS MI 48730

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM WADE CEO 04/14/2015

Electronic Signature of Signing Officer/Director Detail — Date