

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000092143

Entity Name: SANDESTIN ANESTHESIA, P.A.

Current Principal Place of Business:

2927 SAND PINE RD
MIRAMAR BEACH, FL 32550

Current Mailing Address:

2927 SAND PINE RD
MIRAMAR BEACH, FL 32550 US

FEI Number: 45-3727289

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIPMAN, GARY A
60 CLAYTON LANE SUITE A
SANTA ROSA BEACH, FL 32459 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 PRES
Name SPEEDLING, DIANE D
Address 2927 SAND PINE RD
City-State-Zip: MIRAMAR BEACH FL 32550

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: DIANE D SPEEDLING

PRES

04/28/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date