2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000041969

Entity Name: THE SURGERY GROUP, P.A.

Current Principal Place of Business:

4012 N. NINTH AVENUE PENSACOLA. FL 32503

Current Mailing Address:

4012 N. NINTH AVENUE PENSACOLA, FL 32503 US

FEI Number: 59-3256236 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUBEY, ROBERT F 4012 N. NINTH AVENUE PENSACOLA, FL 32503 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

FILED Apr 18, 2013

Secretary of State

CC1684134936

Officer/Director Detail:

Title PRES Title VP

NameRUBEY, ROBERT M.D.NameHODNETTE, BROOKS FJRAddress4012 N. NINTH AVENUEAddress4012 N. NINTH AVENUECity-State-Zip:PENSACOLA FL 32503City-State-Zip:PENSACOLA FL 32503

Title TRES Title D

NameCALUDA, MICHAEL JMDNameTYSON, JOHN WMDAddress4012 N. NINTH AVENUEAddress4012 N. NINTH AVENUECity-State-Zip:PENSACOLA FL 32503City-State-Zip:PENSACOLA FL 32503

Title D Title C

NameLORD, JEFFREYNameFRIEDMAN, JEFFREYAddress4012 N. NINTH AVENUEAddress4012 N. NINTH AVENUECity-State-Zip:PENSACOLA FL 32503City-State-Zip:PENSACOLA FL 32503

Title DIRECTOR

Name CURTSINGER, WILLIAM S M.D.

Address 4012 N. NINTH AVENUE
City-State-Zip: PENSACOLA FL 32503

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: ROBERT F. RUBEY PRES

Electronic Signature of Signing Officer/Director Detail

04/18/2013 Date