

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62193

Entity Name: BAYFRONT ANESTHESIA SERVICES, P.A.

FILED
Jan 14, 2014
Secretary of State
CC5965902502

Current Principal Place of Business:

12225 28TH STREET NORTH
SUITE A
ST PETERSBURG, FL 33716

Current Mailing Address:

12225 28TH STREET NORTH
SUITE A
ST PETERSBURG, FL 33716 US

FEI Number: 59-3072468

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARDER, JEFFREY
12225 28TH STREET NORTH
SUITE A
ST PETERSBURG, FL 33716 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 D
Name MARDER, JEFFREY
Address 998 LAKE PLACIDO CT. NE
City-State-Zip: ST PETERSBURG FL 33703

Title D
Name EVANS, BILL
Address 1261 79TH STREET SOUTH
City-State-Zip: ST. PETERSBURG FL 33707

Title P
Name LUDNER, CONFIDENT
Address 5916 BAYVIEW CIRCLE SOUTH
City-State-Zip: GULFPORT FL 33707

Title D
Name BOYAJIAN, JEOFFREY
Address 2279 MERMAID POINT NE
City-State-Zip: SAINT PETERSBURG FL 33703

Title D
Name LICHTENSTEIN, ALAN MD
Address 9411 SILVERTHORN ROAD
City-State-Zip: LARGO FL 33777

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: MARDER, JEFFREY

D

01/14/2014

Electronic Signature of Signing Officer/Director Detail

Date