

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000054259

Entity Name: EAP-SURGICAL, LLC

Current Principal Place of Business:

9375 66TH STREET NORTH
PINELLAS PARK, FL 33782

Current Mailing Address:

9375 66TH STREET NORTH
PINELLAS PARK, FL 33782

FEI Number: 73-1689226

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WACHTER, JOHN BJR
9375 66TH STREET NORTH
PINELLAS PARK, FL 33782 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

Authorized Person(s) Detail :

Title MGRM
Name WACHTER, JOHN BJR
Address 9375 66TH STREET NORTH
City-State-Zip: PINELLAS PARK FL 33782

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN B WACHTER

MGRM

03/29/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date