

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Feb 08, 1999 8:00am**  
**Secretary of State**

02-08-1999 90040 045 \*\*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **523899**

1. Corporation Name  
**FLORIDA SURGICAL GROUP, P.A.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 106 BOSTON AVENUE, ALTAMONTE SPRGS FL 32701  
 Mailing Address: 106 BOSTON AVENUE, ALTAMONTE SPRGS FL 32701

3. Date Incorporated or Qualified: **02/01/1977**

4. FEI Number: **59-1713370** Applied For:  Not Applicable:

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-29) fields with sub-fields for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent  
**GERSCOVICH, EUGENIO A.**  
 106 BOSTON AVENUE  
 ALTAMONTE SPRGS FL 32701

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code (FL).

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GERSCOVICH, E.A.	
STREET ADDRESS	106 BOSTON AVE.	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ULCH, GEORGE A.	
STREET ADDRESS	106 BOSTON AVE.	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	YURSO, J. MICHAEL	
STREET ADDRESS	106 BOSTON AVE.	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	BRAUNSTEIN, ANDREW	
STREET ADDRESS	106 BOSTON AVE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	CRYAR, JEFFREY	
STREET ADDRESS	106 BOSTON AVENUE	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ DAYTIME PHONE #: 407 834 6965

CR2E034 (11/98)