

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 604059

FILED
Nov 06, 2007
Secretary of State

Entity Name: SURGICAL ASSOCIATES OF CENTRAL FLORIDA, P.A.

Current Principal Place of Business:

1181 ORANGE AVENUE
WINTER PARK,, FL 32789

New Principal Place of Business:

1111 BRICKELL AVENUE
MIAMI, FL 33131

Current Mailing Address:

1181 ORANGE AVENUE
WINTER PARK,, FL 32789

New Mailing Address:

1111 BRICKELL AVENUE
MIAMI, FL 33131

FEI Number: 35-2314152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARR, LOUIS H
1181 ORANGE AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

MILLER, DAVID
1111 BRICKELL AVENUE
MIAMI, FL 33131 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: DAVID MILLER

11/06/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARR, LOUIS H M.D.
Address: 1181 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: CHILDERS, TIMOTHY C MD
Address: 1181 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: VPD () Delete
Name: PORTOGHESE, JOSEPH D M.D.
Address: 1181 ORANGE AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: TD () Delete
Name: WIER, DARYL D M.D.
Address: 1181 ORANGE AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: MAHAN, THOMAS K MD
Address: 1181 ORANGE AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: SD () Delete
Name: POSADA, ROBERTO G MD
Address: 1181 ORANGE AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, MICHAEL
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change () Addition
Name: BROWN, JAMES
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: VPD (X) Change () Addition
Name: WILLIAMS, JOHN
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: TD (X) Change () Addition
Name: JONES, MICHAEL
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change () Addition
Name: MILLER, DAVID
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: SD (X) Change () Addition
Name: SMITH, ROBERT
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID MILLER

D

11/06/2007

Electronic Signature of Signing Officer or Director

Date