

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2008 08:00 AM
Secretary of State

DOCUMENT # F03000004295

1. Entity Name
SURGIS MANAGEMENT SERVICES, INC.



Principal Place of Business
**15305 DALLAS PKWY., #1600
ADDISON, TX 75001**

Mailing Address
**15305 DALLAS PKWY., #1600
ADDISON, TX 75001**



02062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 62-1850965	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

00000842256
03/11/08-80023-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	P.
NAME	WILCOX, WILLIAM
STREET ADDRESS	150305 DALLAS PKWY STE 1600
CITY-ST-ZIP	ADDISON, TX 75001

TITLE	VP
NAME	MCGINN, GEORGE P JR.
STREET ADDRESS	30 BURTON HILLS BLVD., SUITE 450
CITY-ST-ZIP	NASHVILLE, TN 37215

TITLE	SVP
NAME	WELLIK, JOHN J
STREET ADDRESS	15305 DALLAS PKWY STE 1600
CITY-ST-ZIP	ADDISON, TX 75001

TITLE	VAS
NAME	SUTLEY, ERIC
STREET ADDRESS	30 BURTON HILLS BLVD., SUITE 450
CITY-ST-ZIP	NASHVILLE, TN 37215

TITLE	AS
NAME	JENKINS, ALEX
STREET ADDRESS	15305 DALLAS PKWY #1600
CITY-ST-ZIP	ADDISON, TX 75001

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Surgis Management Services Inc
Alex Jenkins Alex Jenkins, Asst Sec 2/14/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #