

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003957

FILED
Jan 05, 2011
Secretary of State

Entity Name: COVENANT SURGICAL PARTNERS, INC.

Current Principal Place of Business:

401 COMMERCE STREET
SUITE 740
NASHVILLE, TN 37219

New Principal Place of Business:

Current Mailing Address:

401 COMMERCE STREET
SUITE 740
NASHVILLE, TN 37219

New Mailing Address:

FEI Number: 26-1860389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: JACQUES, RICHARD K
Address: 401 COMMERCE STREET SUITE 740
City-St-Zip: NASHVILLE, TN 37203

Title: VCOO
Name: HOLST, DAVID
Address: 401 COMMERCE STREET SUITE 740
City-St-Zip: NASHVILLE, TN 37219

Title: V
Name: WESSON, BARRY D
Address: 401 COMMERCE STREET SUITE 740
City-St-Zip: NASHVILLE, TN 37219

Title: V
Name: POLLEY, WHIT
Address: 401 COMMERCE STREET SUITE 740
City-St-Zip: NASHVILLE, TN 37219

Title: S
Name: KING, JACK F JR
Address: 1200 ONE NASHVILLE PL., 150 FOURTH AVE N
City-St-Zip: NASHVILLE, TN 37219

Title: D
Name: KOBAN, MICHAEL A
Address: 401 COMMERCE STREET SUITE 740
City-St-Zip: NASHVILLE, TN 37219

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: BARRY D. WESSON

VP

01/05/2011

Electronic Signature of Signing Officer or Director

Date