
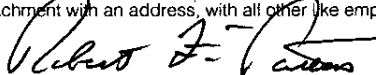


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90065 006 ***150.00

DOCUMENT # F53816 1. Entity Name THE ANESTHESIA GROUP, P.A.					
Principal Place of Business 1717 N.E. ST. STE 203 PENSACOLA FL 32501-6336 US			Mailing Address 1717 N "E" ST SUITE 203 PENSACOLA FL 32501-6336 US		
2. Principal Place of Business 4901 Grande Drive Suite, Apt. #, etc.		3. Mailing Address P.O. Box 30423 Suite, Apt. #, etc.			
City & State Pensacola, FL Zip 32504		City & State Pensacola, FL Zip 32503-1423		4. FEI Number 59-2166388	
Country U.S.A.		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BENTZ, PHILIP D 1717 N.E. ST., STE 203 PENSACOLA FL 32501			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4901 Grande Drive City Pensacola FL Zip Code 32504		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST NALLEY, JAMES H MD 1717 NE ST, SUITE 1203 PENSACOLA FL 32501-6336		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BENTZ, PHILIP D 1717 N "E" ST STE 203 PENSACOLA, FL 00000 32501-6336		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STARKE, MONICA E DR 1717 N "E" STREET, STE 203 PENSACOLA FL 32501-6336		<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ASHMORE, B. WAYNE MD 1717 N "E" ST STE 203 PENSACOLA FL 32501-6336		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATTON, ROBERT F. 1717 N "E" ST STE203 PENSACOLA FL 32501-6336		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FINLEY, GAVIN W MD 1717 N E ST STE 203 PENSACOLA FL 32501-6336		<input type="checkbox"/> Delete		
12. 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 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: 			1/28/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
(850) 438-1848			Daytime Phone #		

Attachment
24025495
#153816

The Anesthesia Group, P.A.

Philip D. Bentz, M.D.
Robert F. Patton, M.D.

James H. Nalley, M.D.

B. Wayne Ashmore, M.D.
Gavin W. Finley, M.D.

P. O. Box 30423, Pensacola, Florida 32503-1423
(850) 438-1848
FAX (850) 438-7209

March 18, 2004

Division of Corporations
Annual Report Section
P.O. Box 6850
Tallahassee, Florida 32314

RE: 59-2166388
SUBJ: 2004 AR

Please **delete** the following Officers and Directors:

Steven M. Rolfes VP
1717 North E Street, Ste. 203
Pensacola, Florida 32501-6336

Richard Klementavicius VP
1717 North E Street, Ste. 203
Pensacola, Florida 32501-6336

Rick D. Smith VP
1717 North E Street, Ste. 203
Pensacola, Florida 32501-6336

Brett S. Sullivan VP
1717 North E Street, Ste. 203
Pensacola, Florida 32501-6336