

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000000755 (7)

1. Corporation Name

AMSURG ENT BREVARD, INC.



Principal Place of Business

102 WOODMONT BLVD., STE 500
NASHVILLE TN 37205

Mailing Address

102 WOODMONT BLVD., STE 500
NASHVILLE TN 37205

3. Date Incorporated or Qualified

02/15/1995

3a. Date of Last Report

2. Principal Place of Business

21 One Burton Hills Blvd.

Suite, Apt. #, etc.

22 Suite 350

City & State

23 Nashville, TN

Zip

37215

Country

25 Davidson

2a. Mailing Address

26 One Burton Hills Blvd.

Suite, Apt. #, etc.

27 Suite 350

City & State

28 Nashville, TN

Zip

29 37215

Country

30 Davidson

4. FEI Number

62-1555412

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent, if not applicable

DATE: Registered Agent's signature required when not a director

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME CIGARRAN, THOMAS G
STREET ADDRESS ONE BURTON HILLS BLVD.
CITY- ST- ZIP NASHVILLE TN ☐ DELETE

TITLE SD
NAME HERR, HENRY D
STREET ADDRESS ONE BURTON HILLS BLVD.
CITY- ST- ZIP NASHVILLE TN ☐ DELETE

TITLE VT
NAME GULMI, CLAIRE M
STREET ADDRESS 102 WOODMONT BLVD., STE 500
CITY- ST- ZIP NASHVILLE TN ☐ DELETE

TITLE AS
NAME HARRELL, ROYCE G
STREET ADDRESS 102 WOODMONT BLVD., STE 500
CITY- ST- ZIP NASHVILLE TN ☐ DELETE

TITLE D
NAME LUNN, RODNEY H
STREET ADDRESS 102 WOODMONT BLVD., STE 500
CITY- ST- ZIP NASHVILLE TN ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME Cigarran, Thomas G.
1.3 STREET ADDRESS One Burton Hills Blvd.
1.4 CITY- ST- ZIP Nashville, TN 37215

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP ☐ Change ☐ Addition

3.1 TITLE VT ☒ Change ☐ Addition
3.2 NAME Gulmi, Claire M.
3.3 STREET ADDRESS One Burton Hills Blvd.
3.4 CITY- ST- ZIP Nashville, TN 37215

4.1 TITLE VS ☒ Change ☐ Addition
4.2 NAME Harrell, Royce D.
4.3 STREET ADDRESS One Burton Hills Blvd.
4.4 CITY- ST- ZIP Nashville, TN 37215

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME Lunn, Rodney H.
5.3 STREET ADDRESS One Burton Hills Blvd.
5.4 CITY- ST- ZIP Nashville, TN 37215

6.1 TITLE V ☐ Change ☒ Addition
6.2 NAME McDonald, Ken
6.3 STREET ADDRESS One Burton Hills Blvd.
6.4 CITY- ST- ZIP Nashville, TN 37215

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or person 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.

SIGNATURE:

Claire M. Gulmi

Vice - President

04/29/96

(615) 385 - 1050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Corporate Phone #

CR2E034 (12/95)