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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000000755 (7)

1. Corporation Name
AMSURG ENT BREVARD, INC.



Principal Place of Business
ONE BURTON HILLS BLVD
SUITE 350
NASHVILLE TN 37215
US

Mailing Address
ONE BURTON HILLS BLVD
SUITE 350
NASHVILLE TN 37215-6104
US

3. Date Incorporated or Qualified 02/15/1995
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	CIGARRAN, THOMAS G.	
STREET ADDRESS	ONE BURTON HILLS BLVD.	
CITY - ST - ZIP	NASHVILLE TN	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	HERR, HENRY D	
STREET ADDRESS	ONE BURTON HILLS BLVD.	
CITY - ST - ZIP	NASHVILLE TN	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	GULMI, CLAIRE M	
STREET ADDRESS	ONE BURTON HILLS BLVD	
CITY - ST - ZIP	NASHVILLE TN	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	HARRELL, ROYCE G	
STREET ADDRESS	ONE BURTON HILLS BLVD	
CITY - ST - ZIP	NASHVILLE TN	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LUNN, RODNEY H	
STREET ADDRESS	ONE BURTON HILLS BLVD	
CITY - ST - ZIP	NASHVILLE TN	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	MCDONALD, KEN	
STREET ADDRESS	ONE BURTON HILLS BLVD	
CITY - ST - ZIP	NASHVILLE TN	

1.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Rodney H. Lunn	
1.3 STREET ADDRESS	One Burton Hills Blvd., Ste 350	
1.4 CITY - ST - ZIP	Nashville, TN 37215	
2.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Kenneth P. McDonald	
2.3 STREET ADDRESS	One Burton Hills Blvd., Ste 350	
2.4 CITY - ST - ZIP	Nashville, TN 37215	
3.1 TITLE	S/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Claire M. Gulmi	
3.3 STREET ADDRESS	One Burton Hills Blvd., Ste 350	
3.4 CITY - ST - ZIP	Nashville, TN 37215	
4.1 TITLE	V/D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Royce D. Harrell	
4.3 STREET ADDRESS	One Burton Hills Blvd., Ste 350	
4.4 CITY - ST - ZIP	Nashville, TN 37215	
5.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Cynthia L. Winker	
5.3 STREET ADDRESS	One Burton Hills Blvd., Ste 350	
5.4 CITY - ST - ZIP	Nashville, TN 37215	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 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 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 sec/TREASURER

4/29/97

(615) 665-1283

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/27/97

CR2E034 (9/96)