

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002059

FILED
Feb 15, 2011
Secretary of State

Entity Name: AMSURG MIAMI, INC.

Current Principal Place of Business:

20 BURTON HILLS BLVD
5TH FLOOR
NASHVILLE, TN 37215 US

New Principal Place of Business:

Current Mailing Address:

20 BURTON HILLS BLVD
5TH FLOOR
NASHVILLE, TN 37215 US

New Mailing Address:

FEI Number: 62-1598504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: P
Name: HOLDEN, CHRISTOPHER A
Address: 20 BURTON HILLS BLVD, 5TH FL
City-St-Zip: NASHVILLE, TN 37215

Title: STD
Name: GULMI, CLAIRE M
Address: 20 BURTON HILLS BLVD, 5TH FLOOR
City-St-Zip: NASHVILLE, TN 37215

Title: V
Name: HARRELL, ROYCE D
Address: 20 BURTON HILLS BLVD, 5TH FLOOR
City-St-Zip: NASHVILLE, TN 37215

Title: V
Name: MANNING, DAVID L
Address: 20 BURTON HILLS BLVD, 5TH FLOOR
City-St-Zip: NASHVILLE, TN 37215

Title: V
Name: PAYNE, BILLIE
Address: 20 BURTON HILLS BLVD, 5TH FL
City-St-Zip: NASHVILLE, TN 37215

Title: V
Name: EASTRIDGE, KEVIN D
Address: 20 BURTON HILLS BLVD
City-St-Zip: NASHVILLE, TN 37215

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: CLARE GULMI

SEC

02/15/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date