

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F95000004214

1. Entity Name
AMSURG BREVARD, INC.



Principal Place of Business
**20 BURTON HILLS BLVD
5TH FLOOR
NASHVILLE, TN 37215 US**

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



04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
62-1545684

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
MANNING, DAVID L
20 BURTON HILLS BLVD 5TH FLOOR
NASHVILLE, TN 37215**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
EASTRIDGE, KEVIN
20 BURTON HILLS BLVD 5TH FLOOR
NASHVILLE, TN 37215**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
GULMI, CLAIRE
20 BURTON HILLS BLVD 5TH FLOOR
NASHVILLE, TN 37215**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
HARRELL, ROYCE
20 BURTON HILLS BLVD 5TH FLOOR
NASHVILLE, TN 37215**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
MCDONALD, KEN
20 BURTON HILLS BLVD 5TH FLOOR
NASHVILLE, TN 37215**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VDS
ZAMOJSKI, DENNIS J
20 BURTON HILLS BLVD 5TH FLOOR
NASHVILLE, TN 37215**

U00000155909
05/05/04-80055-025 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Claire M. Gulmi

Date

Daytime Phone #

4/26/04

615-665-1283