

5-15-98 B'1437C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # F97000000023 (8)

1. Corporation Name
AMSURG MIAMI UROLOGY, INC.

Principal Place of Business
ONE BURTON HILLS BLVD. STE 350
NASHVILLE TN 37215

Mailing Address
ONE BURTON HILLS BLVD. STE 350
NASHVILLE TN 37215

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/02/1997

4. FEI Number
APPLIED FOR 62-1666190

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

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 Zip Country

29 Zip Country

30 Zip Country

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 ☒ DELETE

NAME CIGARRAN, THOMAS G
STREET ADDRESS ONE BURTON HILLS BLVD
CITY-ST-ZIP NASHVILLE TN

1.1 TITLE V ☐ Change ☒ Addition

1.2 NAME LUNN, RODNEY
1.3 STREET ADDRESS ONE BURTON HILLS BLVD
1.4 CITY-ST-ZIP NASHVILLE, TN

TITLE SD ☒ DELETE

NAME HERR, HENRY D
STREET ADDRESS ONE BURTON HILLS BLVD
CITY-ST-ZIP NASHVILLE TN

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VT ☐ DELETE

NAME GULMI, CLAIRE M
STREET ADDRESS ONE BURTON HILLS BLVD
CITY-ST-ZIP NASHVILLE TN

3.1 TITLE STD ☒ Change ☐ Addition

3.2 NAME GULMI, CLAIRE M.
3.3 STREET ADDRESS ONE BURTON HILLS BLVD., SUITE 350
3.4 CITY-ST-ZIP NASHVILLE, TN

TITLE VAS ☐ DELETE

NAME HARRELL, ROYCE D
STREET ADDRESS ONE BURTON HILLS BLVD
CITY-ST-ZIP NASHVILLE TN

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME MCDONALD, KENNETH P
STREET ADDRESS ONE BURTON HILLS BLVD
CITY-ST-ZIP NASHVILLE TN

5.1 TITLE PD ☒ Change ☐ Addition

5.2 NAME MCDONALD, KENNETH P.
5.3 STREET ADDRESS ONE BURTON HILLS BLVD., SUITE 350
5.4 CITY-ST-ZIP NASHVILLE, TN

TITLE V ☐ DELETE

NAME WINKER, CYNTHIA A
STREET ADDRESS ONE BURTON HILLS BLVD
CITY-ST-ZIP NASHVILLE TN

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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

Claire M. Gulmi, Sec/Treas 4/16/98

(615) 665-1283

CR2E034 (10/97)