

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L68058

FILED
Jul 03, 2007
Secretary of State

Entity Name: SURGERY CENTER AT ST. ANDREWS, INC.

Current Principal Place of Business:

1360 E. VENICE AVE
VENICE, FL 34292 US

New Principal Place of Business:

1360 E. VENICE AVE
VENICE, FL 34285 US

Current Mailing Address:

1360 E. VENICE AVE
VENICE, FL 34292 US

New Mailing Address:

1360 E. VENICE AVE
VENICE, FL 34285 US

FEI Number: 65-0196668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAAFFE, MICHAEL S
240 S. PINEAPPLE AVE.
10TH FLOOR
SARASOTA, FL 34236 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SHOEMAKER, DAVID W.
Address: 1360 E. VENICE AVE
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID W. SHOEMAKER

DPS

07/03/2007

Electronic Signature of Signing Officer or Director

Date