

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M81279

FILED
Apr 18, 2012
Secretary of State

Entity Name: ALTAMONTE SPRINGS SURGERY CENTER, INC.

Current Principal Place of Business:

2912 CARL TERRACE
ORLANDO, FL 32804

New Principal Place of Business:

6022 FALCONBRIDGE PLACE
MOUNT DORA, FL 32757

Current Mailing Address:

2912 CARL TERRACE
ORLANDO, FL 32804

New Mailing Address:

6022 FALCONBRIDGE PLACE
MOUNT DORA, FL 32757

FEI Number: 58-1791175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPP, JEFFERY
2912 CARL TERRACE
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

SAPP, JEFFERY
6022 FALCONBRIDGE PLACE
MOUNT DORA, FL 32757 US

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: D. JEFFERY SAPP

04/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: SAPP, D. JEFFERY
Address: 6022 FALCONBRIDGE PLACE
City-St-Zip: MOUNT DORA, FL 32757

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: D. JEFFERY SAPP

PST

04/18/2012

Electronic Signature of Signing Officer or Director

Date