2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State
01-23-2004 90035 008 ***150.00

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01202004 Chg-P CR2E034 (10/03)

DOCUMENT # M84997

1. Entity Name
BRANDON PHYSICIANS' SURGICAL CENTER, INC.

Principal Place of Business	Mailing Address
C/O DENNIS GIL 515 CLIFF DR TEMPLE TERR, FL 33617	C/O DENNIS GIL 515 CLIFF DR TEMPLE TERR, FL 33617

2. Principal Place of Business	3. Mailing Address
15504 Thornhurst Ct	15504 Thornhurst Ct
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33647 Country: US	Zip: 33647 Country: US

4. FEI Number: 59-2896422 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GILL, DENNIS
515 CLIFF DRIVE
TEMPLE TERRACE, FL 33617

7. Name and Address of New Registered Agent

Name: Dennis Gil
Street Address (P.O. Box Number is Not Acceptable): 15504 Thornhurst Ct
City: Tampa FL Zip Code: 33647

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] 813-977-5959 1/20/04
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST GIL, DENNIS 515 CLIFF DR. TEMPLE TERRACE, FL 33617	☑ Delete	DST GIL, DENNIS 15504 Thornhurst Ct Tampa, FL 33647	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EATROFF, RICHARD P O BOX 291354 NA TAMPA, FL 33687	☑ Delete	D Eatroff, Richard P.O. Box 46762 Tampa, FL 33647	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NICHOLS, SCOTT P O BOX 291354 NA TAMPA, FL 33687	☑ Delete	D Nichols, Scott P.O. Box 46762 Tampa, FL 33647	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDERSON, GREG 403 VONDENBUNG DR. BRANDON, FL 33511	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. 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 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] (Dennis Gil) Secretary 813-977-5959
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

1/20/04