2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 29, 2008
Secretary of State

DOCUMENT# P00000089784

Entity Name: EXCEL ANESTHESIA SERVICE, INC.

Current Principal Place of Business:

89 S ATLANTIC AVE #803
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

89 S ATLANTIC BLVD #803
ORMOND BEACH, FL 32176

New Mailing Address:

7 MOSS POINT DRIVE
ORMOND BEACH, FL 32174

FEI Number: 59-3678219 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, BETH
89 S ATLANTIC BLVD
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

SMITH, BETH
7 MOSS POINT DRIVE
ORMOND BEACH, FL 32174 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: BETH SMITH 10/29/2008
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: VP ( ) Delete
Name: SMITH, ELEASE
Address: 101 AMSTERDAM PLACE
City-St-Zip: MADISON, AL 35758

Title: PD ( ) Delete
Name: SMITH, BETH A
Address: 89 S ATLANTIC BLVD
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BETH SMITH BS 10/29/2008
Electronic Signature of Signing Officer or Director Date