

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041565

FILED
Feb 17, 2010
Secretary of State

Entity Name: MCAFEE ANESTHESIA SERVICES, INC.

Current Principal Place of Business:

14613 S.E. NINTH TERRACE
MICANOPY, FL 32667

New Principal Place of Business:

5333 SW 75TH STREET
10
GAINESVILLE, FL 32608

Current Mailing Address:

14613 S.E. NINTH TERRACE
MICANOPY, FL 32667

New Mailing Address:

PO BOX 221
MICANOPY, FL 32667

FEI Number: 02-0582848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCAFEE, THOMAS
14613 S.E. NINTH TERRACE
MICANOPY, FL 32667 US

Name and Address of New Registered Agent:

MCAFEE, THOMAS
5333 SW 75 TH STREET
10
GAINESVILLE, FL 32608 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:

02/17/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: MCAFEE, THOMAS
Address: 5333 SW 75TH STREET
City-St-Zip: GAINESVILLE, FL 32608

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: THOMAS MCAFEE

P

02/17/2010

Electronic Signature of Signing Officer or Director

Date