

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056394

FILED
Apr 19, 2007
Secretary of State

Entity Name: WILLENS ANESTHESIA SERVICES, INC.

Current Principal Place of Business:

4131 S UNIVERSITY BLVD, STE 11
JACKSONVILLE, FL 32216

New Principal Place of Business:

8728 CANOPY OAKS DRIVE
JACKSONVILLE, FL 32256

Current Mailing Address:

4131 S UNIVERSITY BLVD, STE 11
JACKSONVILLE, FL 32216

New Mailing Address:

8728 CANOPY OAKS DRIVE
JACKSONVILLE, FL 32256

FEI Number: 01-0687367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILLEY, STEPHEN E
4465 BAYMEADOWS ROAD
SUITE 3
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

TILLEY & CALLAHAN, P.A., CPAS
4465 BAYMEADOWS ROAD
SUITE 3
JACKSONVILLE, FL 32217 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: STEPHEN E. TILLEY, CPA

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLENS, MICHAEL
Address: 4131 S UNIVERSITY BLVD, STE 11
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLENS, MICHAEL
Address: 8728 CANOPY OAKS DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL WILLENS

P

04/19/2007

Electronic Signature of Signing Officer or Director

Date