

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014327

FILED
Jan 05, 2012
Secretary of State

Entity Name: PETERSON ANESTHESIA, INC.

Current Principal Place of Business:

8778 SW 59TH TERRACE
OCALA, FL 34476 US

New Principal Place of Business:

13501 MOCCASIN GAP RD.
TALLAHASSEE, FL 32309 US

Current Mailing Address:

8778 SW 59TH TERRACE
OCALA, FL 34476 US

New Mailing Address:

13501 MOCCASIN GAP RD.
TALLAHASSEE, FL 32309 US

FEI Number: 37-1457540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SACHER, SALLY
8778 SW 59TH TERRACE
OCALA, FL 34476 US

Name and Address of New Registered Agent:

HUNGERFORD, SALLY
13501 MOCCASIN GAP RD
TALLAHASSEE, FL 32309 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: SALLY HUNGERFORD

01/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HUNGERFORD, SALLY
Address: 13501 MOCCASIN GAP RD.
City-St-Zip: TALLAHASSEE, FL 32309 US

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: SALLY HUNGERFORD

PRES

01/05/2012

Electronic Signature of Signing Officer or Director

Date