

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000026399

1. Entity Name

VERO BEACH SURGICAL ARTS, P.A.



Principal Place of Business

1000 37TH PLACE
STE. 103
VERO BEACH, FL 32960

Mailing Address

1000 37TH PLACE
STE. 103
VERO BEACH, FL 32960

DO NOT WRITE IN THIS SPACE



02232007

No Chg-P

CR2E034 (11/05)

4. FEI Number

56-2325672

Applied For

Not Applied

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLGAN, J. ANDREW
1000 37TH PLACE.
STE. 103
VERO BEACH, FL 32960

**DO NOT WRITE
IN THIS SPACE**

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, 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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
COLGAN, J. ANDREW DDS
1000 37TH PLACE., STE. 103
VERO BEACH, FL 32960

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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04/26/07-80105-010 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/15/07