2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2007
Secretary of State

DOCUMENT# P06000156414

Entity Name: HANUSCHAK ANESTHESIA ASSOCIATES INC.

Current Principal Place of Business:

3120 JASMINE DRIVE
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

3120 JASMINE DRIVE
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

HANUSCHAK, JOANN PRES
3120 JASMINE DRIVE
DELRAY BEACH, FL 33483 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: JO ANN HANUSCHAK 02/06/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HANUSCHAK, JOANN
Address: 3120 JASMINE DRIVE
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: D ( ) Delete
Name: HANUSCHAK, MICHAEL S
Address: 3120 JASMINE DRIVE
City-St-Zip: DELRAY BEACH, FL 33483 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P, (X) Change ( ) Addition
Name: HANUSCHAK, JOANN
Address: 3120 JASMINE DRIVE
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: D T (X) Change ( ) Addition
Name: HANUSCHAK, MICHAEL S
Address: 3120 JASMINE DRIVE
City-St-Zip: DELRAY BEACH, FL 33483 US

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: JO ANN HANUSCHAK PRES 02/06/2007
Electronic Signature of Signing Officer or Director Date