

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067592

FILED
Apr 12, 2011
Secretary of State

Entity Name: FORT MYERS SURGICAL ASSOCIATES, PA

Current Principal Place of Business:

13421 PARKER COMMONS BLVD
SUITE 101
FT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

100 KIRTS BLVD.
SUITE A
TROY, MI 48084

New Mailing Address:

FEI Number: 26-0324383 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KENT, DAVID M
Address: 100 KIRTS BLVD., SUITE A
City-St-Zip: TROY, MI 48084

Title: SEC
Name: KENT, DAVID M
Address: 100 KIRTS BLVD., SUITE A
City-St-Zip: TROY, MI 48084

Title: TRES
Name: KENT, DAVID M
Address: 100 KIRTS BLVD., SUITE A
City-St-Zip: TROY, MI 48084

Title: DIR
Name: LIFESTYLE LIFT FLORIDA, PA
Address: 100 KIRTS BLVD., SUITE A
City-St-Zip: TROY, MI 48084

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: DAVID M KENT

P

04/12/2011

Electronic Signature of Signing Officer or Director

Date