

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000096358

FILED
Apr 13, 2009
Secretary of State

Entity Name: BROWN ANESTHESIA SERVICES, INC.

Current Principal Place of Business:

3780 SE 55TH COURT
OCALA, FL 34471

New Principal Place of Business:

3780 SE 55TH COURT
OCALA, FL 34480 US

Current Mailing Address:

3780 SE 55TH COURT
OCALA, FL 34471

New Mailing Address:

3780 SE 55TH COURT
OCALA, FL 34480 US

FEI Number: 26-0828333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, DENISE
3780 SE 55TH COURT
OCALA, FL 34471 US

Name and Address of New Registered Agent:

BROWN, DENISE
3780 SE 55TH COURT
OCALA, FL 34480 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: DENISE BROWN

04/13/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, DENISE
Address: 3780 SE 55TH COURT
City-St-Zip: OCALA, F 34471

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, DENISE
Address: 3780 SE 55TH COURT
City-St-Zip: OCALA, FL 34480 US

Title: VP () Change (X) Addition
Name: BROWN, GREGORY
Address: 3780 SE 55TH COURT
City-St-Zip: OCALA, FL 34480 US

I hereby certify that the information supplied with this filing does not qualify 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: DENISE BROWN

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date