

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000065200

FILED  
Mar 08, 2012  
Secretary of State

Entity Name: BILLS ANESTHESIA SERVICE P.A.

## Current Principal Place of Business:

5968 BUCK WARD RD.  
BAKER, FL 32531 US

## New Principal Place of Business:

47 HIDDEN COVE  
VALPARAISO, FL 32580 US

## Current Mailing Address:

5968 BUCK WARD RD.  
BAKER, FL 32531 US

## New Mailing Address:

47 HIDDEN COVE  
VALPARAISO, FL 32580 US

FEI Number: 26-3525858

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BILLS, JANET  
5968 BUCK WARD RD.  
BAKER, FL 32531 US

## Name and Address of New Registered Agent:

BILLS, JANET  
47 HIDDEN COVE  
VALPARAISO, FL 32580 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:

03/08/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PRES  
Name: BILLS, JANET P  
Address: 47 HIDDEN COVE  
City-St-Zip: VALPARAISO, FL 32580 US

Title: TRES  
Name: BILLS, JANET P  
Address: 47 HIDDEN COVE  
City-St-Zip: VALPARAISO, FL 32580 US

Title: SEC  
Name: BILLS, JANET P  
Address: 47 HIDDEN COVE  
City-St-Zip: VALPARAISO, FL 32580 US

Title: DIR  
Name: BILLS, JANET P  
Address: 47 HIDDEN COVE  
City-St-Zip: VALPARAISO, FL 32580 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: JANET P BILLS

PRES

03/08/2012

Electronic Signature of Signing Officer or Director

Date