

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000060315

FILED
Jan 08, 2012
Secretary of State

Entity Name: GENESIS 221 ANESTHESIA SERVICES, INC.

Current Principal Place of Business:

815 LIVE OAK TERRACE NE
SAINT PETERSBURG, FL 33703

New Principal Place of Business:

Current Mailing Address:

815 LIVE OAK TERRACE NE
SAINT PETERSBURG, FL 33703

New Mailing Address:

FEI Number: 27-3119346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANTONELLI, TRINA L
815 LIVE OAK TERRACE NE
SAINT PETERSBURG, FL 33703 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: ANTONELLI, TRINA L
Address: 815 LIVE OAK TERRACE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

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: TRINA L ANTONELLI

P

01/08/2012

Electronic Signature of Signing Officer or Director

Date