2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2007
Secretary of State

DOCUMENT# P94000081491

Entity Name: FLORIDA ANESTHESIA SPECIALISTS, P.A.

Current Principal Place of Business:

3618 LANTANA RD
LAKE WORTH, FL 33462

New Principal Place of Business:

3618 LANTANA RD
SUITE 200
LAKE WORTH, FL 33462

Current Mailing Address:

3618 LANTANA RD
LAKE WORTH, FL 33462

New Mailing Address:

3618 LANTANA RD
SUITE 200
LAKE WORTH, FL 33462

FEI Number: 65-0537643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROGERS, ANTHONY
3618 LANTANA RD
LAKE WORTH, FL 33462 US

Name and Address of New Registered Agent:

ROGERS, ANTHONY G
3618 LANTANA RD
SUITE 200
LAKE WORTH, FL 33462 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: ANTHONY G ROGERS 01/15/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROGERS, ANTHONY
Address: 7 DANBY RD
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ROGERS, ANTHONY G
Address: 3618 LANTANA ROAD, SUITE 200
City-St-Zip: LAKE WORTH, FL 33462

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: ANTHONY G ROGERS DP 01/15/2007
Electronic Signature of Signing Officer or Director Date