

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000073879

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: ANESCO ANESTHESIA ASSOCIATES, INC.

## Current Principal Place of Business:

5757 N. DIXIE HWY  
OPERATING ROOM  
FT LAUDERDALE, FL 33334 US

## Current Mailing Address:

3601 W COMMERCIAL BLVD  
SUITE 4 & 5  
FORT LAUDERDALE, FL 33309 US

FEI Number: 65-0694543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MELI, RICHARD  
3601 W COMMERCIAL BLVD  
SUITE 4 & 5  
FORT LAUDERDALE, FL 33309 US

## New Principal Place of Business:

3601 WEST COMMERCIAL BOULEVARD  
SUITE 4 AND 5  
FT LAUDERDALE, FL 33309 US

## New Mailing Address:

3601 WEST COMMERCIAL BOULEVARD  
SUITE 4 AND 5  
FT LAUDERDALE, FL 33309 US

## Name and Address of New Registered Agent:

SNYDER, SCOTT A  
3601 WEST COMMERCIAL BOULEVARD  
SUITE 4 AND 5  
FORT LAUDERDALE, FL 33309 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: SCOTT A. SNYDER

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: KOLBERT, PAUL M.D.  
Address: 3601 W COMMERCIAL BLVD, SUITE 4 & 5  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: P ( ) Delete  
Name: MELI, RICHARD M.D.  
Address: 3601 W COMMERCIAL BLVD, SUITE 4 & 5  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: ST (X) Delete  
Name: SNYDER, SCOTT A MD  
Address: 3601 W COMMERCIAL BLVD, SUITE 4 & 5  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D (X) Delete  
Name: LORENZ, TIMOTHY MD  
Address: 3601 W COMMERCIAL BLVD STE 4&5  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D (X) Delete  
Name: RAMIREZ, RAFAEL MD  
Address: 3601 W COMMERCIAL BLVD STE 4&5  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D (X) Delete  
Name: KUSHNICK, RICHARD MD  
Address: 3601 W COMMERCIAL BLVD STE 4&5  
City-St-Zip: FORT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SNYDER, SCOTT A M.D.  
Address: 3601 WEST COMMERCIAL BLVD, SUITE 4 AND 5  
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: TSD (X) Change ( ) Addition  
Name: KUSHNICK, RICHARD M.D.  
Address: 3601 WEST COMMERCIAL BLVD, SUITE 4 AND 5  
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SCOTT A. SNYDER

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date