2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2012
Secretary of State

DOCUMENT# P96000073879

Entity Name: ANESCO ANESTHESIA ASSOCIATES, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

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

Current Mailing Address:

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

New Mailing Address:

3601 WEST COMMERCIAL BOULEVARD
SUITE 5
FT 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:

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

Name and Address of New Registered Agent:

SNYDER, SCOTT A
3601 WEST COMMERCIAL BOULEVARD
SUITE 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: _____ 04/03/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SNYDER, SCOTT A M.D.
Address: 3601 WEST COMMERCIAL BLVD, SUITE 4 AND 5
City-St-Zip: FORT LAUDERDALE, FL 33309 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: SCOTT A. SNYDER, M.D. PD 04/03/2012
Electronic Signature of Signing Officer or Director — Date