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FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000083198 (7)

1. Corporation Name

ANESTHESIA ASSOCIATES PAIN CENTER, INC.

Principal Place of Business

2021 KINGSLEY AVENUE #102
ORANGE PARK FL 32073

Mailing Address

2021 KINGSLEY AVENUE #102
ORANGE PARK FL 32073

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1996

4. FEI Number

59-3409226

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

29 Zip

30 Country

9. Name and Address of Current Registered Agent

MILLER, DEEVID O M.D.
2021 KINGSLEY AVENUE #102
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81 Name Anthony J. Valachovic, M.D.
82 Street Address (P.O. Box Number is Not Acceptable)
83 2021 Kingsley Ave Suite 102
84 City Orange Park FL 85 Zip Code 32073

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

05/01/98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	MILLER, DEEVID O M.D.	2021 KINGSLEY AVENUE #102	ORANGE PARK FL 32073	<input type="checkbox"/>
D	LEANO, NAPOLEON	2021 KINGSLEY AVE STE 102	ORANGE PRK FL	<input type="checkbox"/>
D	BURDETT, DAVID C	2021 KINGSLEY AVE STE 102	ORANGE PARK FL	<input type="checkbox"/>
D	TRESCOT, ANDREA M	2021 KINGSLEY AVE STE 102	ORANGE PRK FL	<input checked="" type="checkbox"/>
D	Vice President ZAPP, MARK A	2021 KINGSLEY AVE STE 102	ORANGE PARK FL	<input type="checkbox"/>
PD	VALACHOVIC, ANTHONY J	2021 KINGSLEY AVE STE 102	ORANGE PARK FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

Burdette, David C

Secretary
JOHN ZAPP
2021 KINGSLEY AVE, STE 102
ORANGE PARK, FL 32073

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Anthony J. Valachovic

1-22-98

9/14-271-54170

CR2E034 (10/97)