## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000052138

Address:

City-St-Zip:

1205 MAYFIELD AVE WINTER PARK, FL 32789

Entity Name: ASSOCIATES IN NEUROSURGERY, P.A.

FILED Jun 14, 2011 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	NIA DRIVE D, FL 32803			
Current Mailing Address:			New Mailing Address:	
	NIA DRIVE ), FL 32803			
FEI Number:	: 59-3514985	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
283 CRAŃ		ON & GUERRERO, P.L. LVD., SUITE 165 , FL 32701 US		
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATUF	RE:			
	Electron	nic Signature of Registered Age	ent	Date
OFFICERS	S AND DIREC	TORS:		
Title: Name: Address: City-St-Zip:	P ST. LOUIS, PH 1205 MAYFIEL WINTER PARK	.D AVENUE		
Title: Name:	D ST LOUIS. PHI	LLIP G M.D.		

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: PSL P 06/14/2011