

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024184

Entity Name: PRO-ANESTHESIA CARE, INC.

FILED
May 30, 2008
Secretary of State

Current Principal Place of Business:

4302 YARMOUTH PLACE
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

4302 YARMOUTH PLACE
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-3574919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VEGA, ELI S
4302 YARMOUTH PLACE
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

VEGA, MARIA J
4302 YARMOUTH PLACE
PENSACOLA, FL 32514 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: MARIA J. VEGA

05/30/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: VEGA, ELI S
Address: 4302 YARMOUTH PLACE
City-St-Zip: PENSACOLA, FL 32514

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: VEGA, MARIA J
Address: 4302 YARMOUTH PLACE
City-St-Zip: PENSACOLA, FL 32514

Title: SCC () Change (X) Addition
Name: KERVIN, SAMARYS V
Address: 3033 GODWIN LANE
City-St-Zip: PENSACOLA, FL 32526

Title: VP () Change (X) Addition
Name: VEGA, MARIA J
Address: 3033 GODWIN LANE
City-St-Zip: PENSACOLA, FL 325214

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: SAMARYS V. KERVIN

SCC

05/30/2008

Electronic Signature of Signing Officer or Director

Date