2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036132

Entity Name: SUNCOAST SURGERY CENTER, INC.

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	W BRITTANY I ERS, FL 3390				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
12731 NEW BRITTANY BLVD FORT MYERS, FL 33907			P.O. BOX 61199 FORT MYERS, FL 3	P.O. BOX 61199 FORT MYERS, FL 339061199	
FEI Number:	: 65-0912395	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
12731 NÉV	JONATHAN M W BRITTANY E ERS, FL 3390	BLVD			
	named entity see of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Ag	gent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPST () FRANTZ, JONA 12731 NEW BF FORT MYERS,	ITTANY BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JONATHAN M. FRANTZ DPST 04/11/2006