

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V23956

FILED
Mar 21, 2012
Secretary of State

Entity Name: SURGICAL HEALTH OF ORLANDO, INC.

Current Principal Place of Business:

3000 RIVERCHASE GALLERIA
SUITE 500
BIRMINGHAM, AL 35244 US

New Principal Place of Business:

Current Mailing Address:

3000 RIVERCHASE GALLERIA
SUITE 500
BIRMINGHAM, AL 35244 US

New Mailing Address:

FEI Number: 58-1997354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CPD
Name: HAYEK, ANDREW P
Address: 3000 RIVERCHASE GALLERIA, STE 500
City-St-Zip: BIRMINGHAM, AL 35244 US

Title: VD
Name: CLARK, JOSEPH T
Address: 3000 RIVERCHASE GALLERIA, STE 500
City-St-Zip: BIRMINGHAM, AL 35244 US

Title: V
Name: RUCKER, MICHAEL A
Address: 3000 RIVERCHASE GALLERIA, STE 500
City-St-Zip: BIRMINGHAM, AL 35244 US

Title: VT
Name: CLEMENS, PETER J
Address: 3000 RIVERCHASE GALLERIA, STE 500
City-St-Zip: BIRMINGHAM, AL 35244 US

Title: VSD
Name: SHARFF, RICHARD L JR
Address: 3000 RIVERCHASE GALLERIA, STE 500
City-St-Zip: BIRMINGHAM, AL 35244 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: RICHARD L SHARFF JR

VSD

03/21/2012

Electronic Signature of Signing Officer or Director

Date