2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V47477

FILED
Apr 11, 2012
Secretary of State

Entity Name: SAMUEL WELLS SURGICENTER, INC.

Current Principal Place of Business:

3599 UNIVERSITY BLVD.
SUITE 604
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

3599 UNIVERSITY BLVD.
SUITE 604
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3129938 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE FARAH LAW FIRM, P.A.
1506 PRUDENTIAL DRIVE
2ND FLOOR
JACKSONVILLE, FL 32207 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: PSTD
Name: OBI, LEWIS J
Address: 3599 UNIVERSITY BLVD S, #604
City-St-Zip: JACKSONVILLE, FL

Title: V
Name: BAIRSTOW-OBI, MYRA
Address: 3599 UNIVERSITY BLVD S, #604
City-St-Zip: JACKSONVILLE, FL

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: LEWIS J. OBI, M.D., /JEF P 04/11/2012

Electronic Signature of Signing Officer or Director Date