

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V49820

FILED
May 01, 2012
Secretary of State

Entity Name: OKALOOSA SURGICAL ASSOCIATES, P.A.

Current Principal Place of Business:

550 TWIN CITIES BOULEVARD
SUITE C
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

550 TWIN CITIES BOULEVARD
SUITE C
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-3130972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEVIN M. HELMICH, P.A.
4405 COMMOMS DRIVE EAST, SUITE 102
DESTIN, FL 32541 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: HANEY, WILLIAM M
Address: 550 TWIN CITIES BOULEVARD, SUITE C
City-St-Zip: NICEVILLE, FL 32578 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: WILLIAM MICHAEL HANEY

PRES

05/01/2012

Electronic Signature of Signing Officer or Director

Date