

152789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

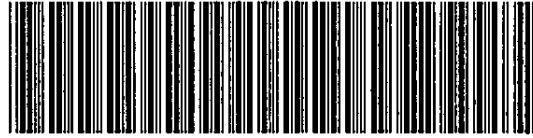
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000109194050

09/14/07--01023--005 **35.00

LA the ch

FILED
07 SEP 14 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts SEP 19 2007

JOHN S. BALL*
CARRIE O. BOYLES
ROBERT A. DAWKINS*
MICHAEL W. FISHER**
BEVERLY H. FURTICK*
HILLARY R. KLEINMAN

MARVIN C. KLOEPPLE*
JOHN E. LAWLOR, III*
MICHAEL R. LEAS*
ROBERT N. MILLER*
KRISTA WALDRON RAY
ALLISON L. RINGLER

MARY A. ROBISON*
CLAY B. TOUSEY, JR.*
SHANNON P. VALENTINE



PLEASE REPLY TO: JACKSONVILLE OFFICE

www.fishertousey.com

FISHER, TOUSEY, LEAS & BALL
ATTORNEYS AT LAW

September 11, 2007

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Anesthesia Consultants, P.A. (the "Corporation")

To Whom It May Concern:

On behalf of our client, Anesthesia Consultants, P.A., enclosed is a Statement of Change of Registered Office or Registered Agent or Both for Corporations. Please note the principal address and registered agent name and address for the Corporation has been changed. Also enclosed is a check made payable to the Florida Department of State for **\$35.00**.

Please feel free to contact me if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Stefan R. Shubert".

Stefan R. Shubert
Paralegal

Enclosures

srs/161332

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Anesthesia Consultants, P.A.
2. The principal office address: ~~8036 Philips Way, Suite 6, Jacksonville, Florida 32256~~
111 NATURE WALK PARKWAY, SUITE 102, ST. AUGUSTINE, FLORIDA 32092
3. The mailing address (if different): P.O. Box 57100, Jacksonville, Florida 32241-7100
4. Date of incorporation/qualification: 7/21/92 Document number: V52789
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Clay B. Tousey, Jr.

2600 Independent Square

Jacksonville, Florida 32202

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Fisher, Tousey, Leas & Ball, P.A.

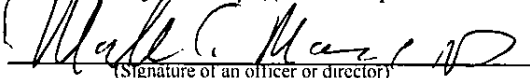
818 North A1A, Suite 104

(P.O. Box NOT acceptable)

Ponte Vedra Beach, Florida 32082

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Mark C. Monroe, President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

9/11/07
(Date)

If signing on behalf of an entity:

Beverly H. Furtick, President
(Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED
SEP 16 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA