2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007
Secretary of State

DOCUMENT# V62577

Entity Name: GYNECOLOGIC SURGEONS, P.A.

Current Principal Place of Business:

2929 UNIVERSITY DR
SUITE 202
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2929 UNIVERSITY DR
SUITE 202
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 65-0354525 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRABER, BENJAMIN MD
2929 UNIVERSITY DR SUITE 202
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

GRABER, BENJAMIN MD
2929 UNIVERSITY DR SUITE
202
CORAL SPRINGS, FL 33065 US

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: BENJAMIN GRABER, M.D. 04/06/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GRABER, BENJAMIN
Address: 2929 UNIVERSITY DR SUITE 202
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: BENJAMIN GRABER, M.D. PRES 04/06/2007
Electronic Signature of Signing Officer or Director Date