

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V65215

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** COLLIER ANESTHESIA, P.A.

**Current Principal Place of Business:**

1336 CREEKSIDE BLVD.  
SUITE 1  
NAPLES, FL 34108

**New Principal Place of Business:**

**Current Mailing Address:**

1336 CREEKSIDE BLVD.  
SUITE 1  
NAPLES, FL 34108

**New Mailing Address:**

**FEI Number:** 65-0353267

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATERHOUSE, LYNDAM  
1336 CREEKSIDE BLVD.  
SUITE 1  
NAPLES, FL 34108 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** CALDWELL, WILLIAM B  
**Address:** 1336 CREEKSIDE BLVD., STE.1  
**City-St-Zip:** NAPLES, FL 34101

**Title:** D  
**Name:** PAINE, GREGORY  
**Address:** 1336 CREEKSIDE BLVD., STE. 1  
**City-St-Zip:** NAPLES, FL 34108

**Title:** VP  
**Name:** ANDERSON, LEE K  
**Address:** 1336 CREEKSIDE BLVD., STE. 1  
**City-St-Zip:** NAPLES, FL 34108

**Title:** P  
**Name:** COOK, THOMAS L.  
**Address:** 1336 CREEKSIDE BLVD., STE. 1  
**City-St-Zip:** NAPLES, FL 34108

**Title:** T  
**Name:** BROOKS, MILLARDS  
**Address:** 1336 CREEKSIDE BLVD., STE 1  
**City-St-Zip:** NAPLES, FL 34108

**Title:** S  
**Name:** WATERHOUSE, LYNDAM  
**Address:** 1336 CREEKSIDE BLVD., STE. 1  
**City-St-Zip:** NAPLES, FL 34108

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:** LYNDAM WATERHOUSE

S

04/30/2010

Electronic Signature of Signing Officer or Director

Date