2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2017
Secretary of State
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Entity Name: SEBASTIAN RIVER ANESTHESIOLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

4054 BEAVER LANE, #7
PORT CHARLOTTE, FL 33952

Current Mailing Address:

P.O. BOX 510460
PUNTA GORDA, FL 33951

FEI Number: 65-1153590

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLMES, DAVID A. ESQ.
FARR LAW FIRM
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: DAVID A. HOLMES 03/31/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	VP, S, T
Name	POLLIZZI, ANTHONY	Name	FORENSKY, JAMES P
Address	P.O. BOX 510460	Address	P. O. BOX 510460
City-State-Zip:	PUNTA GORDA FL 33951	City-State-Zip:	PUNTA GORDA FL 33951

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: ANTHONY POLLIZZI PRESIDENT 03/31/2017

Electronic Signature of Signing Officer/Director Detail — Date