

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000010124

Entity Name: MCA ANESTHESIA INC

Current Principal Place of Business:

1161 NW 80TH AVE
OCALA, FL 34482

Current Mailing Address:

1161 NW 80TH AVE
OCALA, FL 34482 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, MISTY
1161 NW 80TH AVE
OCALA, FL 34482 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name ALLEN, MISTY
Address 1161 NW 80TH AVE
City-State-Zip: Ocala FL 34482

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: MISTY ALLEN

PRESIDENT

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date