2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2015
Secretary of State
CC4721409303

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Entity Name: SHERIDAN CHILDREN'S HEALTHCARE SERVICES OF ARIZONA, INC.

Current Principal Place of Business:

1613 NORTH HARRISON PARKWAY
SUITE 200
SUNRISE, FL 33323

Current Mailing Address:

1613 NORTH HARRISON PARKWAY
SUITE 200
SUNRISE, FL 33323

FEI Number: 47-1934541

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARCUS, JILLIAN
1613 NORTH HARRISON PARKWAY
SUITE 200
SUNRISE, FL 33323 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	D	Title	D
Name	GULMI, CLAIRE	Name	COWARD, ROBERT
Address	1613 NORTH HARRISON PARKWAY #200	Address	1613 NORTH HARRISON PARKWAY #200
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	VP & S	Title	VP& T
Name	MARCUS, JILLIAN	Name	EASTRIDGE, KEVIN
Address	1613 NORTH HARRISON PARKWAY SUITE 200	Address	1613 NORTH HARRISON PARKWAY SUITE 200
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	SVP		
Name	AUERBACH, RICHARD DR.		
Address	1613 NORTH HARRISON PARKWAY SUITE 200		
City-State-Zip:	SUNRISE FL 33323		

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: JILLIAN MARCUS VP 04/28/2015

Electronic Signature of Signing Officer/Director Detail — Date