

**2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P18000031771

**Entity Name:** SURGERY CONSULTANTS OF JACKSONVILLE INC

**Current Principal Place of Business:**

4054 SAWYER ROAD  
SARASOTA, FL 34233

**Current Mailing Address:**

PO BOX 25368  
SARASOTA, FL 34277 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PAYNE, VINCENT  
4054 SAWYER ROAD  
SARASOTA, FL 34233 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 ROB, ADAMS  
Address 4054 SAWYER ROAD  
City-State-Zip: SARASOTA FL 34233

*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:** ROB ADAMS

P

04/30/2019

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date