

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000139759

Entity Name: SOUTHERN ELITE ANESTHESIA SERVICES, LLC

Current Principal Place of Business:

1312 WOODLAWN DRIVE
ORANGE PARK, FL 32065

Current Mailing Address:

1312 WOODLAWN DRIVE
ORANGE PARK, FL 32065 US

FEI Number: 46-3806970

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATTERSON, CHRIS
2 S ROSCOE BLVD
PONTE VEDRA BEACH, FL 32082 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

Authorized Person(s) Detail :

Title MGRM
Name ESTRADA, JOSE L
Address 1312 WOODLAWN DRIVE
City-State-Zip: ORANGE PARK FL 32065

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ESTRADA, JOSE L

MGRM

02/02/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date