2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2017
Secretary of State
CC7852102717

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Entity Name: FPRA ANESTHESIA SERVICES, LLC

Current Principal Place of Business:

5948 TURKEY LAKE RD.
ORLANDO, FL 32819

Current Mailing Address:

5948 TURKEY LAKE RD.
ORLANDO, FL 32819

FEI Number: 36-4832592

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAJAN, CHERIAN
5948 TURKEY LAKE RD
ORLANDO, FL 32819 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	MGR
Name	SAJAN, CHERIAN
Address	5948 TURKEY LAKE RD
City-State-Zip:	ORLANDO FL 32819

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: CHERIAN SAJAN, MD OWNER 04/04/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date