

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000089907

**Entity Name:** SUNSHINE STATE SURGICAL SPECIALISTS, P.A.

**Current Principal Place of Business:**

801 RED WOLF TRAIL  
MYRTLE BEACH, SC 29579

**Current Mailing Address:**

801 RED WOLF TRAIL  
MYRTLE BEACH, SC 29579 US

**FEI Number:** 02-0702706

**Certificate of Status Desired:** No

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

BJERKEN, DAVID MD  
1879 NIGHTINGALE LANE  
B3  
TAVARES, FL 32778 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  
Name BJERKEN, DAVID MD  
Address 801 RED WOLF TRAIL  
City-State-Zip: MYRTLE BEACH SC 29579

*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:** DAVID BJERKEN

MGR

03/25/2016

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

\_\_\_\_\_ Date