2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105309

Entity Name: MARION MEDICAL EQUITY INVESTORS CORPORATION

FILED Mar 06, 2006 Secretary of State

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE ORLANDO, FL 32801

SUITE 500

ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE SUITE 500 SUITE 200, ATTN: AMY PATTERSON

ORLANDO, FL 32801 ORLANDO, FL 32801

FEI Number: 65-1121573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATTERSON, AMY J PATTERSON, AMY J 450 S. ORANGE AVENUE 420 S. ORANGE AVENUE SUITE 500 ORLANDO, FL 32801

ORLANDO, FL 32801 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: 03/06/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: DPCF (X) Change () Addition

HUTCHISON, THOMAS J III Name: Name: BEEBE, STUART J 450 S. ORANGE AVENUE 420 S. ORANGE AVENUE, SUITE 500 Address: Address:

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

EVP Title: DEVP Title: () Delete (X) Change () Addition BEEBE, STUART J Name: Name: ANDERSON, PHILLIP M.

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE, SUITE 500 Address: Address:

ORLANDO, FL 32801 ORLANDO, FL 32801 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition FVP DSVP

ANDERSON, PHILLIP M HETTINGA, CLARK Name: Name:

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE, SUITE 500 Address: Address:

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

() Delete Title: SVP Title: (X) Change () Addition GUTIERREZ, LYNN HETTINGA, CLARK Name: Name:

Address: 450 S. ORANGE AVENUE Address: 420 S. ORANGE AVENUE City-St-Zip: City-St-Zip: ORLANDO, FL 32801 ORLANDO, FL 32801

Title: Title: () Delete () Change () Addition BOURNE, ROBERT A Name:

Name: 450 S. ORANGE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip:

Title: () Delete Title: (X) Change () Addition ROSS, KIMBERLY P Name: Name: PATTTERSON, AMY J

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE, SUITE 500 Address: Address:

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Ρ SIGNATURE: STUART J. BEEBE 03/06/2006