2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# P05000044851

Entity Name: CORNERSTONE THERAPY, INC.

Current Principal Place of Business:

7840 SABAL LAKE DR.
PORT SAINT LUCIE, FL 34986 US

New Principal Place of Business:

1403 NW LEONARDO CIRCLE
PORT SAINT LUCIE, FL 34986 US

Current Mailing Address:

7840 SABAL LAKE DR.
PORT ST. LUCIE, FL 34986

New Mailing Address:

1403 NW LEONARDO CIRCLE
PORT ST. LUCIE, FL 34986

FEI Number: 20-2568017 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLE, CAROL
7840 SABAL LAKE DR.
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

COLE, CAROL
1403 NW LEONARDO CIRCLE
PORT SAINT LUCIE, FL 34986 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: _____ 04/30/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: COLE, CAROL
Address: 1403 NW LEONARDO CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: VP
Name: PUHL, THOMAS
Address: 1403 NW LEONARDO CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34986

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: CAROL COLE P 04/30/2012
Electronic Signature of Signing Officer or Director — Date