2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2009
Secretary of State

DOCUMENT# P06000035631

Entity Name: M.D./D.O. ASSOCIATES, INC.

Current Principal Place of Business:

8250 BRYAN DAIRY ROAD SUITE 310
LARGO, FL 33777

New Principal Place of Business:

8250 BRYAN DAIRY ROAD
SUITE #310
LARGO, FL 33777

Current Mailing Address:

8250 BRYAN DAIRY ROAD SUITE 310
LARGO, FL 33777

New Mailing Address:

8250 BRYAN DAIRY ROAD
SUITE 310
LARGO, FL 33777

FEI Number: 20-4521554 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PATEL, KUSH MD
8520 BRYAN DAIRY ROAD SUITE 310
LARGO, FL 33777 US

Name and Address of New Registered Agent:

PATEL, KUSH MD
8520 BRYAN DAIRY ROAD
SUITE 310
LARGO, FL 33777 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: 01/18/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PATEL, KUSH K
Address: 8250 BRYAN DAIRY ROAD SUITE 310
City-St-Zip: LARGO, FL 33777

Title: V ( ) Delete
Name: AZNER, IRA
Address: 8250 BRYAN DAIRY ROAD SUITE 310
City-St-Zip: LARGO, FL 33777

Title: S ( ) Delete
Name: AZNER, JAY B
Address: 8250 BRYAN DAIRY ROAD SUITE 310
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: KUSH K PATEL MD P 01/18/2009
Electronic Signature of Signing Officer or Director — Date