2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2012
Secretary of State

DOCUMENT# P09000055039

Entity Name: INFECTIOUS DISEASES OF THE TREASURE COAST PA

Current Principal Place of Business:

501 N.W. LAKE WHITNEY PLACE
SUITE 102
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

501 N.W. LAKE WHITNEY PLACE
SUITE 102
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 27-0463748 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ORLOVIC, MILOS
501NW LAKE WHITNEY PLACE
SUITE 102
PORT ST. LUCIE, FL 349861615 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DR
Name: ORLOVIC, DRAGANA
Address: 5553 SW BELLFLOWER CT
City-St-Zip: PALM CITY, FL 34990 US

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: DRAGANA ORLOVIC DR 01/17/2012

Electronic Signature of Signing Officer or Director — Date