

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47541

FILED
Jan 18, 2013
Secretary of State
CC8808764942

Entity Name: VISION 21 PHYSICIAN PRACTICE MANAGEMENT COMPANY

Current Principal Place of Business:

939 ELKRIDGE LANDING ROAD, SUITE 200
LINTHICUM, MD 21090

Current Mailing Address:

939 ELKRIDGE LANDING ROAD, SUITE 200
LINTHICUM, MD 21090

FEI Number: 59-2749609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEINSTEIN, AUDREY
7700 CONGRESS AVENUE
SUITE 3108
BOCA RATON, FL 33487 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 T
Name ARNDT, KENNETH W
Address 939 ELKRIDGE LANDING ROAD,
SUITE 200
City-State-Zip: LINTHICUM MD 21090

Title S
Name WEINSTEIN, AUDREY M
Address 7700 CONGRESS AVENUE, SUITE
3108
City-State-Zip: BOCA RATON FL 33487

Title PD
Name ALCORN, ANDREW
Address 939 ELKRIDGE LANDING ROAD,
SUITE 200
City-State-Zip: LINTHICUM MD 21090

Title ASAT
Name KELLY, VICKIE G
Address 939 ELKRIDGE LANDING ROAD,
SUITE 200
City-State-Zip: LINTHICUM MD 21090

Title VP
Name DALTON, MARK
Address 3033 N 44TH ST, SUITE 270
City-State-Zip: PHOENIX AZ 85018

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: AUDREY WEINSTEIN

S

01/18/2013

Electronic Signature of Signing Officer/Director Detail

Date