2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2014
Secretary of State
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Entity Name: CENTRAL FLORIDA INJURY SOUTHWEST, INC.

Current Principal Place of Business:

8719 SUMMERVILLE PLACE
ORLANDO, FL 32819

Current Mailing Address:

8719 SUMMERVILLE PLACE
ORLANDO, FL 32819 US

FEI Number: 27-0789814

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FADEM, JEROLD JSR., MD
8719 SUMMERVILLE PLACE
ORLANDO, FL 32819 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	PSTD
Name	FADEM, JEROLD JSR.,MD
Address	882 SOUTH KIRKMAN RD., SUITE 100
City-State-Zip:	ORLANDO FL 32811

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: JEROLD J. FADEM, SR., MD PTSD 01/12/2014

Electronic Signature of Signing Officer/Director Detail — Date