2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2012
Secretary of State

DOCUMENT# 519364

Entity Name: PEDIATRIC ASSOCIATES OF ORLANDO, P.A.

Current Principal Place of Business:

414 N MILLS AVENUE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

414 N MILLS AVENUE
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-1702222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIDEA, MARK B MD
414 N. MILLS AVE.
ORLANDO, FL 32803 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: P
Name: DIDEA, MARK MD
Address: 414 N MILLS AVE
City-St-Zip: ORLANDO, FL 32803

Title: VP
Name: GANS, BABARA MD
Address: 414 N MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803

Title: TS
Name: YAEGER, DAVID
Address: 414 N. MILLS AVENUE
City-St-Zip: ORLANDO, FL

Title: T
Name: SILVERMAN MD, MAXINE
Address: 414 NORTH MILLS AVE
City-St-Zip: ORLANDO, FL 00000,

Title: S
Name: COFFMAN, GREGORY MD
Address: 414 N MILLS AVENUE
City-St-Zip: ORLANDO, FL 32803

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: MARK B. DIDEA, M.D. P 01/20/2012

Electronic Signature of Signing Officer or Director — Date