2011 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Feb 21, 2011
Secretary of State

DOCUMENT# A01000001485

Entity Name: DERMATOLOGY ASSOCIATES OF BREVARD, LLLP

Current Principal Place of Business:

1286 SOUTH FLORIDA AVENUE
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1286 SOUTH FLORIDA AVENUE
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-3759157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KIRKPATRICK, RICHARD C
1286 SOUTH FLORIDA AVENUE
ROCKLEDGE, FL 32955 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

GENERAL PARTNER INFORMATION:

Document #:
Name: KIRKPATRICK, RICHARD C
Address: 1286 SOUTH FLORIDA AVENUE
City-St-Zip: ROCKLEDGE, FL 32955

Document #:
Name: SEQUEIRA, MARIO J
Address: 1286 SOUTH FLORIDA AVENUE
City-St-Zip: ROCKLEDGE, FL 32955

Document #:
Name: SPICER, MICHAEL S
Address: 1286 SOUTH FLORIDA AVENUE
City-St-Zip: ROCKLEDGE, FL 32955

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

Address:
City-St-Zip:

Address:
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: RICHARD C. KIRKPATRICK MD 02/21/2011
Electronic Signature of Signing General Partner — Date