2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

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Entity Name: LAKE ERIE COLLEGE OF OSTEOPATHIC MEDICINE, INC.

Current Principal Place of Business:

5000 LAKEWOOD RANCH BOULEVARD
BRADENTON, FL 34211

New Principal Place of Business:

Current Mailing Address:

1858 WEST GRANDVIEW BLVD.
ERIE, PA 16509

New Mailing Address:

FEI Number: 25-1698677 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEORGE, ROBERT J DO,
5000 LAKEWOOD RANCH BOULEVARD
BRADENTON, FL 334211 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: FERRETTI, JOHN M DO
Address: 1858 WEST GRANDVIEW BLVD.
City-St-Zip: ERIE, PA 16509

Title: V
Name: FERRETTI, SILVIA M DO
Address: 1858 WEST GRANDVIEW BLVD.
City-St-Zip: ERIE, PA 16509

Title: S
Name: ECKERT, MARY L
Address: 5515 PEACH STREET
City-St-Zip: ERIE, PA 16509

Title: T
Name: OLINGER, RICHARD P
Address: 8215 PLATZ ROAD
City-St-Zip: FAIRVIEW, PA 16415

Title: C
Name: VISNOSKY, MICHAEL J
Address: 120 WEST 10TH STREET
City-St-Zip: ERIE, PA 16501

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN M. FERRETTI, D.O. PRES 01/05/2012

Electronic Signature of Signing Officer or Director — Date