

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003045

FILED
Apr 19, 2012
Secretary of State

Entity Name: FLORIDA MEDICAL SPECIALISTS, INC.

Current Principal Place of Business:

3280 PEACHTREE ROAD SUITE 2625
ATLANTA, GA 30305

New Principal Place of Business:

3280 PEACHTREE ROAD
SUITE 2625
ATLANTA, GA 30305

Current Mailing Address:

3280 PEACHTREE ROAD
SUITE 2625
ATLANTA, GA 30305

New Mailing Address:

FEI Number: 65-0149635 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CAMPBELL, WESLEY
Address: 3280 PEACHTREE ROAD SUITE 2625
City-St-Zip: ATLANTA, GA 30305

Title: CFO
Name: FERNANDEZ DE CASTRO, J. MIGUEL
Address: 3280 PEACHTREE ROAD SUITE 2625
City-St-Zip: ATLANTA, GA 30305

Title: VP/S
Name: ARGUEDAS, CLARE
Address: 3280 PEACHTREE ROAD SUITE 2625
City-St-Zip: ATLANTA, GA 30305

Title: CD
Name: PERLMAN, RICHARD E
Address: 3280 PEACHTREE ROAD SUITE 2625
City-St-Zip: ATLANTA, GA 30305

Title: CEOD
Name: PRICE, JAMES K
Address: 3280 PEACHTREE ROAD SUITE 2625
City-St-Zip: ATLANTA, GA 30305

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: CLARE ARGUEDAS

VP/S

04/19/2012

Electronic Signature of Signing Officer or Director

Date