2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F64894

Entity Name: CARDIOLOGY PHYSICIANS, P.A.

FILED Jan 07, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
- a	iton i inicipal i lace di Dacinico

873 STERTHAUS AVENUE STE 302

ORMOND BEACH, FL 321745130 US

Current Mailing Address: New Mailing Address:

873 STERTHAUS AVENUE STE 302

ORMOND BEACH, FL 321745130 US

FEI Number: 59-2163944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARLEY, JAMES E. 873 STERTHAUS AVENUE SUITE 302 ORMOND BEACH, FL 32174 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST

Name: WALKER, JOHN L MD

Address: 873 STERTHAUS AVE., SUITE 302 City-St-Zip: ORMOND BEACH, FL 32174 US

Title: F

Name: CARLEY, JAMES E MD

Address: 873 STERTHAUS AVE., SUITE 302 City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP

Name: ARAB, DINESH MD

Address: 873 STERTHAUS AVE., SUITE 302 City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP

Name: HENDERSON, DAVID A M.D.
Address: 873 STERTHAUS AVE., SUITE 302
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP

Name: JAMIDAR, HUMAYUN, A., M.D.

Address: 311 N. CLYDE MORRIS BLVD., STE.320 City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VP

Name: QUADRAT, OTAKAR M.D.

Address: 311 N. CLYDE MORRIS BLVD., STE. 320 City-St-Zip: DAYTONA BEACH, FL 32174 US

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: JOHN L. WALKER ST 01/07/2010