2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F78514

Entity Name: GULF COAST PHYSICIAN PARTNERS, P.A.

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1921 E. NINE MILE RD
 4964 HWY 90

 PENSACOLA, FL 32514
 SUITE B

PACE, FL 32571

Current Mailing Address: New Mailing Address:

 1765 NINE MILE RD
 4964 HWY 90

 SUITE 1, BOX 103
 SUITE B

 PENSACOLA, FL 32514
 PACE, FL 32571

FEI Number: 59-2191195 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:

GULF COAST PHYSICIAN PARNTERS
1765 NINE MILE RD.

GULF COAST PHYSICIAN PARTNERS
4964 HWY 90

SUITE 1, BOX 103 SUITE B
PENSACOLA, FL 32514 US PACE, FL 32571 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: KIMBERLY A. DAVIS 01/17/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD () Delete Title: MD (X) Change () Addition

Name: MAYEAUX, DENNIS R Name: LEWIS, JANET
Address: 5992 BERRYHILL RD., SUITE 300 Address: 5992 BERRYHILL ROAD SUITE 300

City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570

Name: LE THI, BACH-UYEN Name: LE THI, BACH-UYEN

Address: 5992 BERRYHILL RD., SUITE 300 Address: 5992 BERRYHILL ROAD SUITE 300

City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570

Name: CHEN, ALICIA Name: MAYEAUX, DENNIS

Address: 1921 E. NINE MILE RD. Address: 5992 BERRYHILL ROAD SUITE 300

City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: MILTON, FL 32570

Title: MD () Delete Title: MD (X) Change () Addition Name: WHIBBS, WILLIAM Name: MILEY, JENNIFER

 Address:
 1921 E. NINE MILE RD.
 Address:
 1921 E NINE MILE ROAD

 City-St-Zip:
 PENSACOLA, FL 32514
 City-St-Zip:
 PENSACOLA, FL 32514

Title: MD () Delete Title: MD (X) Change () Addition

Name: LEWIS, JANET Name: SNOW, KAREN

 Address:
 5992 BERRYHILL RD. SUITE 300
 Address:
 1921 E. NINE MILE ROAD

 City-St-Zip:
 MILTON, FL 32570
 City-St-Zip:
 PENSACOLA, FL 32514

Title: MD () Delete Title: MD (X) Change () Addition

Name: MILEY, JENNIFER Name: CHEN, ALICIA
Address: 1921 E. NINE MILE RD. Address: 1921 E. NINE MILE ROAD
City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32514

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KIMBERLY A. DAVIS ED 01/17/2008