2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2010
Secretary of State

DOCUMENT# F78514

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

Current Principal Place of Business:

5992 BERRYHILL RD
SUITE 300
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

5992 BERRYHILL RD
SUITE 300
MILTON, FL 32570

New Mailing Address:

FEI Number: 59-2191195 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GULF COAST PHYSICIAN PARTNERS
5992 BERRYHILL RD.
SUITE 300
MILTON, FL 32570 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: MD
Name: LEWIS, JANET
Address: 5992 BERRYHILL ROAD SUITE 300
City-St-Zip: MILTON, FL 32570

Title: MD
Name: LE THI, BACH-UYEN
Address: 5992 BERRYHILL ROAD SUITE 300
City-St-Zip: MILTON, FL 32570

Title: MD
Name: MAYEAUX, DENNIS
Address: 5992 BERRYHILL ROAD SUITE 300
City-St-Zip: MILTON, FL 32570

Title: MD
Name: YOUNG, DAVID B
Address: 5992 BERRYHILL ROAD SUITE 300
City-St-Zip: MILTON, FL 32570

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: JANET I. LEWIS MD PRES 01/19/2010

Electronic Signature of Signing Officer or Director — Date