2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2011
Secretary of State

DOCUMENT# J33212

Entity Name: JAMES D. BAKER, III, M.D., P.A.

Current Principal Place of Business:

2 SHIRCLIFF WAY
SUITE 415 DEPAUL BLDG
JACKSONVILLE, FL 322044723

New Principal Place of Business:

Current Mailing Address:

2 SHIRCLIFF WAY
SUITE 415 DEPAUL BLDG
JACKSONVILLE, FL 322044723

New Mailing Address:

FEI Number: 59-2713008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAKER, JAMES D III
2 SHIRCLIFF WAY
SUITE 415 DEPAUL BLDG
JACKSONVILLE, FL 32204 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: DPT
Name: BAKER, JAMES D M.D.
Address: 2 SHIRCLIFF WAY STE 415 DEPAUL BLDG
City-St-Zip: JACKSONVILLE, FL 32204

Title: S
Name: SMART, JAMES BENNY M.D.
Address: 2 SHIRCLIFF WAY STE 415 DEPAUL BLDG
City-St-Zip: JACKSONVILLE, FL 32204

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: JAMES D BAKER, III, MD DPT 04/01/2011

Electronic Signature of Signing Officer or Director — Date