2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2011
Secretary of State

DOCUMENT# N07000002977

Entity Name: MAR WALT PROFESSIONAL MEDICAL CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

917 MAR WALT DRIVE
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

917 MAR WALT DRIVE
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 20-8691738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ANASTASIO, SANDRA
917 MAR WALT DRIVE
FORT WALTON BEACH, FL 32547 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: ANASTASIO, PATRICK J
Address: 917 MAR WALT DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S
Name: MILLS, JAMES E
Address: 917 MAR WALT DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: T
Name: ZANT, E. ALBERT
Address: 917 MAR WALT DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICK ANASTASIO P 02/15/2011

Electronic Signature of Signing Officer or Director — Date