2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2012
Secretary of State

DOCUMENT# N38513

Entity Name: LAKE MEDICAL BUILDING, INC.

Current Principal Place of Business:

3801 N. HIGHWAY 19-A
MT. DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

3801 N. HIGHWAY 19-A
SUITE #402
MT. DORA, FL 32757

New Mailing Address:

FEI Number: 59-3130944 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HORNER, KELLY
3801 NORTH HWY 19-A
SUITE 402
MT. DORA, FL 32757 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: DP
Name: TAYLOR, KEVIN T.
Address: 3801 N. HWY 19-A SUITE #402
City-St-Zip: MT. DORA, FL 32757

Title: D
Name: MENESES-TAYLOR, RUTH
Address: 3801 N. HWY 19-A SUITE #402
City-St-Zip: MT. DORA, FL 32757

Title: D
Name: RIDINGER, WILLIAM L.
Address: 3801 NORTH HWY 19-A #406
City-St-Zip: MOUNT DORA, FL 32757

Title: DTS
Name: CULLEN, DOTTIE
Address: 3801 NORTH HWY 19-A #408
City-St-Zip: MOUNT DORA, FL 32757

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: KEVIN T TAYLOR MD PRES 04/25/2012

Electronic Signature of Signing Officer or Director — Date