2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2012
Secretary of State

DOCUMENT# P00000012572

Entity Name: VERA ENDOCRINE ASSOCIATES, INC

Current Principal Place of Business:

1667 NORTH CLYDE MORRIS BLVD.
STE 2
DAYTONA BEACH, FL 32117

New Principal Place of Business:

Current Mailing Address:

1667 NORTH CLYDE MORRIS BLVD.
STE 2
DAYTONA BEACH, FL 32117

New Mailing Address:

FEI Number: 59-3622303 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VERA, ARNOLD MD
1667 N CLYDE MORRIS BLVD STE 2
DAYTONA BEACH, FL 32117 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: D
Name: VERA, ARNOLD MD,MSC
Address: 1667 N CLYDE MORRIS BLVD STE 2
City-St-Zip: DAYTONA BEACH, FL 32117

Title: VP
Name: VERA, ANNY B
Address: 1667 NORTH CLYDE MORRIS BLVD. STE 2
City-St-Zip: DAYTONA BEACH, FL 32117

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: ARNOLD VERA, M.D., M.SC., F.A.C.E., C.D.E. PRES 03/14/2012

Electronic Signature of Signing Officer or Director — Date