2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2012
Secretary of State

DOCUMENT# P00000022218

Entity Name: COLLABORATIVE PRACTICE, INC.

Current Principal Place of Business:

219 WILDWOOD CIR.
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

219 WILDWOOD CIRCLE
DEERFIELD BEACH, FL 33442

Current Mailing Address:

219 WILDWOOD CIR.
DEERFIELD BEACH, FL 33442

New Mailing Address:

219 WILDWOOD CIRCLE
DEERFIELD BEACH, FL 33442

FEI Number: 65-0984172 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VIOLA, LAURIE
1353 SE 7TH CT
DEERFIELD BEACH, FL 33441 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: VALIANTE, JOANNE
Address: 219 WILDWOOD CIRCLE
City-St-Zip: DEERFIELD BEACH, FL 33442

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: JOANNE VALIANTE P 03/15/2012

Electronic Signature of Signing Officer or Director — Date