2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034030

Entity Name: FIRST COAST PULMONARY ASSOCIATES, P.A.

FILED Feb 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

150 SOUTH PARK BLVD 100 WHETSTONE PLACE

STE 208 STE 208

ST AUGUSTINE, FL 32806 ST AUGUSTINE, FL 32806

Current Mailing Address: New Mailing Address:

150 SOUTHPARK BLVD. 100 WHETSTONE PLACE

STE 208 STE 208

ST AUGUSTINE, FL 32806 ST AUGUSTINE, FL 32806

FEI Number: 59-3714157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BORBELY, BERNARD R
150 SOUTHPARK BLVD.

BORBELY, BERNARD R
100 WHETSTONE PLACE

SUITE 208 SUITE 208

ST. AUGUSTINE, FL 32086 US ST. AUGUSTINE, FL 32086 US

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: BERNARD R. BORBELY 02/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: BORBELY, BERNARD R
Address: 150 SOUTHPARK BLVD. STE 208

Name: BORBELY, BERNARD R
Address: 100 WHETSTONE PLACE, SUITE 208

City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: ST () Delete Title: ST (X) Change () Addition

Name: CAROL, BORBELY Name: CAROL, BORBELY
Address: 150 SOUTHPARK BLVD. STE 208 Address: 100 WHETSTONE PLACE, SUITE 208

City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VP () Delete Title: VP (X) Change () Addition Name: KUBIET, MARTIN Name: KUBIET, MARTIN

Address: 150 SOUTHPARK BLVD., SUITE 208 Address: 100 WHETSTONE PLACE, SUITE 208

City-St-Zip: ST. AUGUSTINE, FL 32086 City-St-Zip: ST. AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BERNARD R. BORBELY P 02/14/2008