2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058770

Entity Name: CAROLYN D. PASS, MD, P.A.

FILED Apr 20, 2011 Secretary of State

| Current Principal Place of Business: New P | rincipal Place of Business: |
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|--|-----------------------------|

1255 STATE ROAD 60 EAST LAKE WALES, FL 33853

Current Mailing Address: New Mailing Address:

320 1ST STREET N 320 1ST STREET NORTH WINTER HAVEN, FL 33881 WINTER HAVEN, FL 33881

FEI Number: 52-2326354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

PASS, CAROLYN D 134 LAKE MARIAM WAY WINTER HAVEN, FL 338843818 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

 Name:
 PASS, CAROLYN D MD

 Address:
 134 LAKE MARIAM WAY

 City-St-Zip:
 WINTER HAVEN, FL 33884 38

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: CAROLYN D PASS, MD PRES 04/20/2011