2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2005
Secretary of State

DOCUMENT# P01000088166

Entity Name: WILLIAM C. KOHLER, M.D., P.A.

Current Principal Place of Business:

24087 TWISTER LANE
BROOKSVILLE, FL 34602

New Principal Place of Business:

4075 MARINER BLVD
SPRING HILL, FL 34609

Current Mailing Address:

24087 TWISTER LANE
BROOKSVILLE, FL 34602

New Mailing Address:

FEI Number: 59-3742796 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KOHLER, WILLIAM C MD
Address: 24087 TWISTER LANE
City-St-Zip: BROOKSVILLE, FL 34602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM C. KOHLER D 03/12/2005

Electronic Signature of Signing Officer or Director — Date