

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

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FILED
Aug 29, 2012
Secretary of State

Entity Name: FIRST COAST CARDIOVASCULAR INSTITUTE, P.A.

Current Principal Place of Business:

3900 UNIVERSITY BOULEVARD SOUTH
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

3900 UNIVERSITY BOULEVARD SOUTH
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 47-0854466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLAZIER & GLAZIER, P.A.
8825 PERIMETER PARK BLVD.
SUITE 504
JACKSONVILLE, FL 32216 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: PTD
Name: KHATIB, YAZAN M.D.
Address: 3900 UNIVERSITY BLVD SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPSD
Name: ALI, VAQAR M.D.
Address: 3900 UNIVERSITY BLVD SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

Title: D
Name: AL-SAGHIR, YOUSSEF M.D.
Address: 3900 UNIVERSITY BLVD SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

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: VAQAR ALI, M.D.

VPSD

08/29/2012

Electronic Signature of Signing Officer or Director

Date