2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008
Secretary of State

DOCUMENT# P03000036638

Entity Name: EMILY F. ARSENAULT, M.D., P.A.

Current Principal Place of Business:

8340 LAKEWOOD RANCH BLVD
SUITE 390
BRADENTON, FL 34202

New Principal Place of Business:

8926 77TH TERRACE EAST
SUITE 101
BRADENTON, FL 34202

Current Mailing Address:

8340 LAKEWOOD RANCH BLVD
SUITE 390
BRADENTON, FL 34202

New Mailing Address:

8926 77TH TERRACE EAST
SUITE 101
BRADENTON, FL 34202

FEI Number: 27-0053197 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOONEY, STEPHEN R
800 N. MAGNOLIA AVENUE, SUITE 1500
ORLANDO, FL 32803 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: DR. ( ) Delete
Name: ARSENAULT, EMILY F M.D.
Address: 8340 LAKEWOOD RANCH BLVD, STE 390
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition
Name: ARSENAULT, EMILY F M.D.
Address: 8926 77TH TERRACE EAST, SUITE 101
City-St-Zip: BRADENTON, FL 34202

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: EMILY F. ARSENAULT DR. 04/07/2008

Electronic Signature of Signing Officer or Director — Date