2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2011
Secretary of State

DOCUMENT# P03000062884

Entity Name: CSI OF FLORIDA, INC.

Current Principal Place of Business:

5400 S UNIVERSITY DRIVE
SUITE 415
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 813847
HOLLYWOOD, FL 33081

New Mailing Address:

FEI Number: 06-1698403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOFFREDO, THOMAS H
% GARY ROBINSON, P.A.
401 EAST LAS OLAS BLVD., SUITE 1850
FORT LAUDERDALE, FL 33301 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: PD
Name: WILDS, RANDALL
Address: 5400 S UNIVERSITY DRIVE, # 415
City-St-Zip: DAVIE, FL 33328

Title: VD
Name: STEWART, ORALD
Address: 5400 S UNIVERSITY DRIVE, # 415
City-St-Zip: DAVIE, FL 33328

Title: STD
Name: BLANTON, MACK
Address: 5400 S UNIVERSITY DRIVE, SUITE # 415
City-St-Zip: DAVIE, FL 33328

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: MACK BLANTON STD 04/15/2011

Electronic Signature of Signing Officer or Director — Date