

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000113004

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** COAST TO COAST PHYSICIANS ALLIANCE, P.A.

**Current Principal Place of Business:**

7680 UNIVERSAL BLVD  
SUITE 210  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

7557 WEST SAND LAKE RD  
PMB 113  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 20-1457851

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SCHICK, DAVID L ESQ.  
301 E. PINE STREET  
SUITE 1400  
ORLANDO, FL 32801 US

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

SCHICK, DAVID L ESQ.  
200 SOUTH ORANGE AVENUE  
SUITE 2300  
ORLANDO, FL 32801 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: DAVID L SCHICK

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: AYADI, JAUVID B M.D.  
Address: 9240 SOUTHERN BREEZE DRIVE  
City-St-Zip: ORLANDO, FL 32836 US

Title: DIR  
Name: KALAN, PRAKASH P M.D.  
Address: 10454 BIG TREE COURT  
City-St-Zip: ORLANDO, FL 32836 US

Title: DIR  
Name: OWEN, MATTHEW B D.O.  
Address: 7422 CYPRESS GRV RD  
City-St-Zip: ORLANDO, FL 32819 US

Title: DIR  
Name: POWERS, ROBERT B D.O.  
Address: 10115 COVE LAKE DR  
City-St-Zip: ORLANDO, FL 32836

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: JAUVID B AYADI

DIR

04/28/2011

Electronic Signature of Signing Officer or Director

Date