

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046670

FILED  
Apr 29, 2010  
Secretary of State

Entity Name: OCALA HOSPITALIST GROUP, P.A.

## Current Principal Place of Business:

695 SE 47TH LOOP  
OCALA, FL 34480

## New Principal Place of Business:

1500 SW 1ST AVENUE  
OCALA, FL 34471 US

## Current Mailing Address:

695 SE 47TH LOOP  
OCALA, FL 34480

## New Mailing Address:

910 SW 1ST AVENUE  
201  
OCALA, FL 34471 US

FEI Number: 51-0539324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KHANNA, ANISH  
695 SE 47TH LOOP  
OCALA, FL 34480 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  
Name: KHANNA, ANISH  
Address: 695 SE 47TH LOOP  
City-St-Zip: OCALA, FL 34480 US

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: ANISH KHANNA

DR

04/29/2010

Electronic Signature of Signing Officer or Director

Date