2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P05000048212

Entity Name: GULFSTREAM UROLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

C/O FLORIDA MEDICAL MANAGEMENT CONSULTANTS
224 COMMERCIAL BLVD., SUITE 200
LAUDERDALE-BY-THE-SEA, FL 33308

New Principal Place of Business:

2100 NEBRASKA AVENUE
SUITE 211
FT PIERCE, FL 34950

Current Mailing Address:

C/O FLORIDA MEDICAL MANAGEMENT CONSULTANTS
224 COMMERCIAL BLVD., SUITE 200
LAUDERDALE-BY-THE-SEA, FL 33308

New Mailing Address:

2100 NEBRASKA AVENUE
SUITE 211
FT PIERCE, FL 34950

FEI Number: 20-2614319 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: D ( ) Delete
Name: BALL, ADAM J
Address: C/O 224 COMMERCIAL BLVD., SUITE 200
City-St-Zip: LAUDERDALE-BY-THE-SEA, FL 33308

Title: D ( ) Delete
Name: VANAPPLEDORN, SCOTT
Address: C/O 224 COMMERCIAL BLVD., SUITE 200
City-St-Zip: LAUDERDALE-BY-THE-SEA, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BALL, ADAM J
Address: 2100 NEBRASKA AVENUE SUITE 211
City-St-Zip: FT PIERCE, FL 34950

Title: D (X) Change ( ) Addition
Name: VANAPPLEDORN, SCOTT
Address: 2100 NEBRASKA AVENUE SUITE 211
City-St-Zip: FT PIERCE, FL 34950

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAM J. BALL PRES 04/27/2006

Electronic Signature of Signing Officer or Director — Date