2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2011
Secretary of State

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Entity Name: WILLETTE SHAEFFER D.M.D., PA

Current Principal Place of Business:

2711-2 ST. JOHNS BLUFF RD. S.
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

2711-1 ST. JOHNS BLUFF RD. S.
JACKSONVILLE, FL 32246 US

Current Mailing Address:

2711-2 ST. JOHNS BLUFF RD. S.
JACKSONVILLE, FL 32246 US

New Mailing Address:

2711-1 ST. JOHNS BLUFF RD. S.
JACKSONVILLE, FL 32246 US

FEI Number: 76-0798965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAEFFER, WILLETTE L
2711-2 ST. JOHNS BLUFF RD. S.
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

SHAEFFER, WILLETTE L
2711-1 ST. JOHNS BLUFF RD. S.
JACKSONVILLE, FL 32246 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: 03/22/2011

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: SHAEFFER, WILLETTE L
Address: 2711-2 ST JOHNS BLUFF RD. S.
City-St-Zip: JACKSONVILLE, FL 32216

Title: CEO
Name: SHAEFFER, WARREN
Address: 2711-2 ST JOHNS BLUFF RD. S.
City-St-Zip: JACKSONVILLE, FL 32216

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: WILLETTE SHAEFFER, DMD P 03/22/2011

Electronic Signature of Signing Officer or Director — Date