2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2012
Secretary of State

DOCUMENT# P06000022859

Entity Name: SANGOSANYA MEDICAL ASSOCIATES, P.A.

Current Principal Place of Business:

4089 CURLEW DR.
PENSACOLA, FL 32514

New Principal Place of Business:

3289 THOREAU AVE.
TALLAHASSEE, FL 32311

Current Mailing Address:

4089 CURLEW DR.
PENSACOLA, FL 32514

New Mailing Address:

3289 THOREAU AVE.
TALLAHASSEE, FL 32311

FEI Number: 20-4572027 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANGOSANYA, AFOLABI O
4089 CURLEW DR.
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

SANGOSANYA, AFOLABI O
3289 THOREAU AVE
TALLAHASSEE, FL 32311 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: _____ 01/23/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D
Name: SANGOSANYA, AFOLABI O
Address: 3289 THOREAU AVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: O
Name: SANGOSANYA, TATIANA O
Address: 3289 THOREAU AVE.
City-St-Zip: TALLAHASSEE, FL 32311

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: AFOLABI SANGOSANYA D 01/23/2012
Electronic Signature of Signing Officer or Director — Date