2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

DOCUMENT# P09000041735

Entity Name: DAVID SCOTT MARSHALL, M.D., P.A.

Current Principal Place of Business:

347 N. NEW RIVER DRIVE, EAST
#2510
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

347 N. NEW RIVER DRIVE, EAST
#1604
FORT LAUDERDALE, FL 33301

Current Mailing Address:

347 N. NEW RIVER DRIVE, EAST
#2510
FORT LAUDERDALE, FL 33301

New Mailing Address:

347 N. NEW RIVER DRIVE, EAST
#1604
FORT LAUDERDALE, FL 33301

FEI Number: 26-1516212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARSHALL, DAVID S M.D.
347 N. NEW RIVER DRIVE, EAST
#2510
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

MARSHALL, DAVID S M.D.
347 N. NEW RIVER DRIVE, EAST
#1604
FORT LAUDERDALE, FL 33301 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: _____ 04/30/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: MARSHALL, DAVID S
Address: 347 N. NEW RIVER DRIVE, EAST #1604
City-St-Zip: FORT LAUDERDALE, FL 33301

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: DAVID S. MARSHALL, MD PRES 04/30/2012
Electronic Signature of Signing Officer or Director — Date