2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2011
Secretary of State

DOCUMENT# P10000050205

Entity Name: CHARLOTTE COUNTY MEDICAL SOLUTIONS, INC.

Current Principal Place of Business:

3191 HARBOR BLVD
SUITE C
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

5603 S.W. 10TH AVENUE
CAPE CORAL, FL 33914

New Mailing Address:

3822 BROADWAY AVENUE
SUITES A AND C
FT. MYERS, FL 33901 US

FEI Number: 27-2839721 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TOUHEY, KRISTEN J
3822 BROADWAY AVENUE
SUITE C
FT. MYERS, FL 33901 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

OFFICERS AND DIRECTORS:

Title: P
Name: TOUHEY, KRISTEN J
Address: 3822 BROADWAY AVENUE SUITE C
City-St-Zip: FT. MYERS,, FL 33901 US

Title: VP
Name: LINDGREN, TODD
Address: 3822 BROADWAY AVENUE SUITE C
City-St-Zip: FT. MYERS, FL 33901 US

Title: T
Name: SEDA, FRANK JR
Address: 3822 BROADWAY AVENUE SUITE C
City-St-Zip: FT. MYERS, FL 33901 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: KRISTEN J. TOUHEY PRES 01/12/2011

Electronic Signature of Signing Officer or Director — Date