2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# P11000058591

Entity Name: ORTHO-CALL CENTRAL FLORIDA, P.A.

Current Principal Place of Business:

2161 COUNTY RD 540A, #286
LAKELAND, FL 33813

New Principal Place of Business:

400 AVE K SE
BUILDING 4
WINTER HAVEN, FL 33880

Current Mailing Address:

2161 COUNTY RD 540A, #286
LAKELAND, FL 33813

New Mailing Address:

127 VAN FLEET CT
AUBURNDALE, FL 33823

FEI Number: 45-4740960 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH, FL 321152491 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: BEISSINGER, STEPHEN M.D.
Address: 400 AVE K SE BUILDING 4
City-St-Zip: WINTER HAVEN, FL 33880

Title: ST
Name: FISHER, MAURY L MD
Address: 400 AVE K SE BUILDING 4
City-St-Zip: WINTER HAVEN, FL 33880

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: MAURY L FISHER MD ST 04/24/2012

Electronic Signature of Signing Officer or Director — Date