2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# P93000012895

Entity Name: LEWIS BRODSKY, M.D., P.A.

Current Principal Place of Business:

1407 M.D. LANE
SUITE B
TALLAHASSEE, FL 32308

New Principal Place of Business:

1245 CEDAR CENTER
TALLAHASSEE, FL 32301

Current Mailing Address:

1407 M.D. LANE
SUITE B
TALLAHASSEE, FL 32308

New Mailing Address:

1245 CEDAR CENTER
TALLAHASSEE, FL 32301

FEI Number: 38-2156340 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRODSKY, LEWIS
1407 M.D. LANE
SUITE B
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

BRODSKY, LEWIS
1245 CEDAR CENTER
TALLAHASSEE, FL 32301 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: _____ 04/25/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BRODSKY, LEWIS
Address: 1704 M.D. LANE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BRODSKY, LEWIS
Address: 1245 CEDAR CENTER
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEWIS BRODSKY PD 04/25/2008
Electronic Signature of Signing Officer or Director — Date