2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000014710

Entity Name: JACKSONVILLE HEART CENTER, P.A.

FILED Jul 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1905 CORPORATE SQ BLVD JACKSONVILLE, FL 32216 **Current Mailing Address: New Mailing Address:** 1905 CORPORATE SQ BLVD JACKSONVILLE, FL 32216 FEI Number: 59-3221727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHRANK, JOEL P M.D. 1905 CORPORATE SQ BLVD JACKSONVILLE, FL 32216 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition UTSET, BERNARDO M M.D. Name: Name: 1905 CORPORATE SQUARE BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: DV Title: () Delete () Change () Addition HILTON, THOMAS C M.D. Name: Name: 1905 CORPORATE SQUARE BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: () Delete Title: Title: DV () Change () Addition RAMA, PAMELA M.D. Name: Name: 1905 CORPORATE SQUARE BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: DV () Delete Title: () Change () Addition HANCOCK, HOLLY M.D. Name: Name: Address: 1905 CORPORATE SQUARE BLVD Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: Title: () Delete () Change () Addition GOEL, SATISH M.D. Name: Name: 1905 CORPORATE SQUARE BLVD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: DCEO () Delete Title: () Change () Addition Name: SCHRANK, JOEL P.M.D. Name: 1905 CORPORATE SQUARE BLVD Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32216

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: MARK A MASTERS, PHD CAO 07/09/2009



ATTACHMENT

Document #P94000014710
Jacksonville Heart Center, P.A.
Additional Officers and Directors:

Title

DV

Name Street Address City-St-ZIP Farrell, Paul W. M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name Street Address City-St-ZIP Hassel, C. David M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name

Litt, Marc R. M.D.

Street Address City-St-ZIP 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DΛ

Name Street Address City-St-ZIP Adams, Kenneth C. M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

D۷

Name Street Address City-St-ZIP Wainwright, William R. M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name Street Address City-St-ZIP Luke, Robert A. M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name Street Address City-St-ZIP Sotolongo, Carlos M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name Street Address City-St-ZIP Davuluri, Ashwini M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name

Leu, Shannon M.D.

Street Address City-St-ZIP 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name Street Address City-St-ZIP Bisher, Edward M.D. 1905 Corporate Square Blvd Jacksonville, FL 32216

Title

DV

Name

Bansal, Manish M.D.

Street Address City-St-ZIP 1905 Corporate Square Blvd Jacksonville, FL 32216