

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057478

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** ADVANCED OTOLARYNGOLOGY SERVICES, P.A.

**Current Principal Place of Business:**

3627 UNIVERSITY BLVD., STE 210  
JACKSONVILLE, FL 322164211 US

**New Principal Place of Business:**

**Current Mailing Address:**

3627 UNIVERSITY BLVD., STE 210  
JACKSONVILLE, FL 322164211 US

**New Mailing Address:**

FEI Number: 59-3257868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

FISHER, TOUSEY, LEAS & BALL, P.A.  
818 N. A1A  
SUITE 104  
PONTE VEDRA BEACH, FL 32082 US

**Name and Address of New Registered Agent:**

BECK, RICHARD A MD  
3627 UNIVERSITY BLVD. S.  
210  
JACKSONVILLE, FL 32216 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: RICHARD A. BECK MD

03/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BECK, RICHARD A  
Address: 3627 UNIVERSITY BLVD S, STE 210  
City-St-Zip: JACKSONVILLE, FL 322164211

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: RICHARD A. BECK, MD

D

03/14/2011

Electronic Signature of Signing Officer or Director

Date