

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000019041

FILED
Feb 21, 2012
Secretary of State

Entity Name: OCALA LUNG & CRITICAL CARE ASSOCIATES, INC.

Current Principal Place of Business:

1834 SW 1ST AVE
STE 101
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

1834 SW 1ST AVE
SUITE 101
OCALA, FL 34471

New Mailing Address:

FEI Number: 65-0650144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITRA, PURUSHOTTAM
1834 SW 1ST AVE
OCALA, FL 34471 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: MD
Name: MITRA, PURUSHOTTAM
Address: 1834 SW 1ST AVE SUITE 101
City-St-Zip: OCALA, FL 34471

Title: VP
Name: KOHLI, NAGESH
Address: 1834 SW 1ST AVE SUITE 101
City-St-Zip: OCALA, FL 34471

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: PURUS MITRA, M.D.

MGMR

02/21/2012

Electronic Signature of Signing Officer or Director

Date