2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000066588

Entity Name: JASON R. MERCER, M.D., P.A.

FILED Mar 16, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1400 HAND AVE. 801 BEVILLE RD SUITE H SUITE 201

ORMOND BEACH, FL 32174 SOUTH DAYTONA, FL 32119

Current Mailing Address: New Mailing Address:

1400 HAND AVE. 801 BEVILLE RD SUITE H SUITE 201

ORMOND BEACH, FL 32174 SOUTH DAYTONA, FL 32119

FEI Number: 59-3336055 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MERCER, JASON R MERCER, JASON R MD
1400 HAND AVE. 801 BEVILLE RD
SUITE H SUITE 201

ORMOND BEACH, FL 32174 US SOUTH DAYTONA, FL 32119 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: JASON R MERCER 03/16/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD

 Name:
 MERCER, JASON R

 Address:
 693 LONE OAK DRIVE

 City-St-Zip:
 PORT ORANGE, FL 32127

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: JASON R MERCER MD PSTD 03/16/2011