2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007
Secretary of State

DOCUMENT# P99000020513

Entity Name: TRI-COUNTY PULMONARY & MULTI-SPECIALTY GROUP, P.A.

Current Principal Place of Business:

1501 US HWY. 441 NORTH
STE. 1706
THE VILLAGES, FL 32159

New Principal Place of Business:

1507 BUENOS AIRES BLVD.
THE VILLAGES, FL 32159

Current Mailing Address:

1501 US HWY. 441 NORTH
STE. 1706
THE VILLAGES, FL 32159

New Mailing Address:

1507 BUENOS AIRES BLVD.
THE VILLAGES, FL 32159

FEI Number: 59-3561297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VILLA, MARIVIC
1501 US HWY. 441 NORTH
STE. 1706
THE VILLAGES, FL 32159 US

Name and Address of New Registered Agent:

VILLA, MARIVIC
1507 BUENOS AIRES BLVD.
THE VILLAGES, FL 32159 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: 02/22/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VILLA, MARIVIC MD
Address: 11265 SE SUNSET HARBOR RD.
City-St-Zip: SUMMERFIELD, FL 34491

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIVIC VILLA P 02/22/2007
Electronic Signature of Signing Officer or Director — Date