2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

Apr 23, 2004 8:00 am Secretary of State DOCUMENT # P99000076878 1. Entity Name 04-23-2004 90205 043 ***150.00 ECS OF VIRGINIA, INC. Principal Place of Business Mailing Address 500 WEST CYPRESS CREEK ROAD C/O LEGAL DEPT danparan SUITE 450 2828 CROASDAILE DRIVE FT. LAUDERDALE FL 33309 **DURHAM NC 27705** 2. Principal Place of Business 3. Mailing Address 2828 CROASDAILE DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE 4. FEI Number City & State City & State Applied For 65-0941022 DURHAM, NC Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 21105 6_Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. **DCEO** TITLE TITLE Change Addition Delete SCOTT, STEVEN M M.D. NAME NAME STEPHEN J. DRESNICK, M.D. 2828 CROASDAILE DR 2828 CROASDAILE PRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DURHAM NC 27705 CITY-ST-ZIP DURHAM, NC 27105 **PCFO** Delete VS Change Addition TITLE TITLE GREENMAN, JACK S EUGENE F. DAUCHERT, JR NAME NAME 2828 CROASDAILE DR STREET ADDRESS STREET ADDRESS 2828 CROASDAILE DRIVE **DURHAM NC 27705** CITY-ST-ZIP CITY-ST-ZIP DURHAMING 27705 TITLE ST Delete XX Addition TITLE Change NAME WEGNER, ANITA S NAME TAMMY DAVIS STREET ADDRESS STREET ADDRESS 2828 CROASDAILE DRIVE 2828 CROASDAILE DR CITY-ST-ZIP DURHAM NC 27705 CITY-ST-ZIP DURHAM, HC 27705 X Addition TITLE Delete TITLE ☐ Change NAME ELEEN E. SPOON STREET ADDRESS 2828 CROASDAILE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DURHAM, NC 27705 Change ☐ Addition TITLE ☐ Delete TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if

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