

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S86480

FILED
Feb 19, 2010
Secretary of State

Entity Name: ENDOSCOPY CENTER OF OCALA, INC.

Current Principal Place of Business:

1901 SE 18TH AVE, BUILDING #400
OCALA, FL 34471 US

New Principal Place of Business:

1901 SE 18TH AVE
BUILDING #400
OCALA, FL 34471 US

Current Mailing Address:

1901 SE 18TH AVE, BUILDING #400
OCALA, FL 34471 US

New Mailing Address:

1901 SE 18TH AVE
BUILDING #400
OCALA, FL 34471 US

FEI Number: 59-3088327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EMERSON, WILLIAM
1901 S.E. 18TH AVE., BUILDING # 400
OCALA, FL 34471 US

Name and Address of New Registered Agent:

EMERSON, WILLIAM
1901 S.E. 18TH AVE
BUILDING #400
OCALA, FL 34471 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:

02/19/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: VANELDIK, RICHARD B
Address: 1901 SE 18TH AVE, BUILDING 400
City-St-Zip: OCALA, FL 34471 US

Title: S
Name: BARISH, ROBERT W
Address: 1901 SE 18TH AVE, BUILDING 400
City-St-Zip: OCALA, FL 34471 US

Title: VP
Name: RUMALLA, PRABHAKAR
Address: 1901 SE 18TH AVE, BUILDING 400
City-St-Zip: OCALA, FL 34471 US

Title: V
Name: MAXWELL, R. RYAN
Address: 1901 SE 18TH AVE, BUILDING 400
City-St-Zip: OCALA, FL 34471 US

Title: VP
Name: MCCLARY, ROBERT D
Address: 1901 SE 18TH AVE, BUILDING 400
City-St-Zip: OCALA, FL 34471 US

Title: V
Name: TRUESDALE, RICHARD A
Address: 1901 SE 18TH AVE, BUILDING 400
City-St-Zip: OCALA, FL 34471 US

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: WILLIAM EMERSON

ADMI

02/19/2010

Electronic Signature of Signing Officer or Director

Date