2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2011
Secretary of State

DOCUMENT# N05000008683

Entity Name: LATORRA-LARSEN MEDICAL FOUNDATION, INC.

Current Principal Place of Business:

2800 N. FLAGLER DRIVE STE 805
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

2800 N. FLAGLER DRIVE STE 805
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 06-1754658 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LATORRA, ALBERT J
440 COLUMBIA DR #500
WEST PALM BEACH, FL 33409 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: D
Name: LATORRA, ALBERT J DR
Address: 2800 N. FLAGLER DRIVE STE 805
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D
Name: LARSEN, WILHELM C.J. DR
Address: 2800 N. FLAGLER DRIVE STE 805
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D
Name: LARSEN, ALEX DR
Address: 2800 N. FLAGLER DRIVE STE 805
City-St-Zip: WEST PALM BEACH, FL 33407

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT LATORRA D 03/24/2011

Electronic Signature of Signing Officer or Director — Date