2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2014
Secretary of State
CC3943845026

DOCUMENT# H03214

Entity Name: LAKESIDE PEDIATRICS, P.A.

Current Principal Place of Business:

5950 S.FLORIDA AVE.
LAKELAND, FL 33813

Current Mailing Address:

5950 S.FLORIDA AVE.
LAKELAND, FL 33813

FEI Number: 59-2406345

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	SECRETARY
Name	LEVITEN, DANIEL L.	Name	CORY, MATTHEW J
Address	4007 CHEVERLY DR	Address	325 PALMOLA
City-State-Zip:	LAKELAND FL	City-State-Zip:	LAKELAND FL

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: DANIEL L. LEVITEN PRESIDENT 04/18/2014

Electronic Signature of Signing Officer/Director Detail — Date