

No. C 199013		Due no later than Jul 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. MDLIVE MEDICAL GROUP, P.A. MARK A BURNHEIMER ESQ 4110 COPPER RIDGE DRIVE SUITE 204 TRAVERSE CITY MI 49684		NATIONAL CORPORATE RESEARCH LT 921 S ORCHARD ST STE G BOISE ID 83705			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DAVID TALBOTT, MD	13630 NW 8TH STREET SUITE 205	SUNRISE	FL	USA	33325	
PRESIDENT	STEVE V. GURLAND	13630 NW 8TH STREET SUITE 205	SUNRISE	FL	USA	33325	
TREASURER	DANIEL KAPP, MD	13630 NW 8TH STREET SUITE 205	SUNRISE	FL	USA	33325	
SECRETARY	DANIEL KAPP, MD.	13630 NW 8TH STREET SUITE 205	SUNRISE	FL	USA	33325	
DIRECTOR	STEVE V. GURLAND, MD	13630 NW 8TH STREET SUITE 205	SUNRISE	FL	USA	33325	
DIRECTOR	DR. T.F. BREWER	13630 NW 8TH STREET SUITE 205	SUNRISE	FL	USA	33325	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
FL		Signature: Justin Stone		Date: 07/19/2016			
C 199013		Name (type or print): Justin Stone		Title: EVP & General Counsel			
Processed 07/19/2016		* Electronically provided signatures are accepted as original signatures.					