

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742949

FILED
Apr 04, 2012
Secretary of State

Entity Name: SUSANNA WESLEY HEALTH CENTER, INC.

Current Principal Place of Business:

5300 WEST 16TH AVENUE
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

C/O CHANTAL FALBY
PO BOX 4369
HIALEAH, FL 33014 US

New Mailing Address:

FEI Number: 59-1837338 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: VD
Name: REAMS, PATRICIA
Address: 5300 W 16TH AVE
City-St-Zip: HIALEAH, FL 33012

Title: PD
Name: LOZANO, MADELYN
Address: 5300 W 16TH AVE
City-St-Zip: HIALEAH, FL 33012

Title: SD
Name: BLANKS, MARY CAY
Address: 5300 W 16TH AVE
City-St-Zip: HIALEAH, FL 33012

Title: TD
Name: ROMANO, EMILY
Address: 5300 W 16TH AVE
City-St-Zip: HIALEAH, FL 33012

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: MADELYN LOZANO

PD

04/04/2012

Electronic Signature of Signing Officer or Director

Date