

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 756562

FILED
Oct 19, 2004
Secretary of State**Entity Name:** HEALTH CENTRAL FOUNDATION, INC.**Current Principal Place of Business:**HEALTH CENTRAL
10000 W COLONIAL DR
OCOE, FL 34761 US**New Principal Place of Business:****Current Mailing Address:**10000 W COLONIAL DR
OCOE, FL 34761 US**New Mailing Address:****FEI Number:** 59-2091206 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**GOULD, PAMELA
10000 W COLONIAL DR
OCOE, FL 34761 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:** TRES () Delete
Name: AHRENDT, PATRICIA
Address: 1556 SACKETT CIRCLE
City-St-Zip: ORLANDO, FL 32818**Title:** SEC () Delete
Name: FAZIO, JR., LOUIS
Address: 2381 BRIDGEWOOD TRAIL
City-St-Zip: ORLANDO, FL 32828**Title:** PCD () Delete
Name: RUSTIN-JUDD, CATHY
Address: 5130 ISLEWORTH COUNTRY CLUB DR
City-St-Zip: WINDERMERE, FL 34786**Title:** CD () Delete
Name: NEUMAYER, EILEEN
Address: 3709 POMPANO CT
City-St-Zip: GOTH, FL 34734**Title:** VCD () Delete
Name: THADEN, MYRON
Address: 12256 PARK AVENUE
City-St-Zip: WINDERMERE, FL 34786**Title:** PRES () Delete
Name: GOULD, PAMELA
Address: 2931 SUNBITTERN CT
City-St-Zip: WINDERMERE, FL 34786**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** TRES (X) Change () Addition
Name: NICKENS, ANN
Address: P.O. BOX 206
City-St-Zip: HOWEY IN THE HILL, FL 34737**Title:** VCD (X) Change () Addition
Name: FAZIO, JR., LOUIS, JR.
Address: 2381 BRIDGEWOOD TRAIL
City-St-Zip: ORLANDO, FL 32828**Title:** PCD (X) Change () Addition
Name: NEUMAYER, EILEEN
Address: 3709 POMPANO CT
City-St-Zip: GOTH, FL 34734**Title:** CD (X) Change () Addition
Name: THADEN, MYRON
Address: 12256 PARK AVENUE
City-St-Zip: WINDERMERE, FL 34786**Title:** SEC (X) Change () Addition
Name: ZARGARI, JOHN
Address: 2650 S. MAGUIRE ROAD, STE A
City-St-Zip: OCOE, FL 34761**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAMELA GOULD

PRES

10/19/2004

Electronic Signature of Signing Officer or Director

Date