

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843576

FILED
Mar 01, 2012
Secretary of State

Entity Name: NORTH AMERICAN HEALTH SERVICES, INC.

Current Principal Place of Business:

900 HOPE WAY
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

900 HOPE WAY
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 62-1041820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROMME, JEFF
900 HOPE WAY
ALTAMONTE SPRINGS, FL 32714 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: ST
Name: SCHULTZ, MICHAEL
Address: 900 HOPE WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PVPD
Name: SCHULTZ, MICHAEL
Address: 900 HOPE WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: AS
Name: PHAM, WENDY
Address: 900 HOPE WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: MICHAEL SCHULTZ

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03/01/2012

Electronic Signature of Signing Officer or Director

Date