

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005018

FILED  
Mar 03, 2012  
Secretary of State

Entity Name: SONIA PLOTNICK HEALTH FUND INC.

**Current Principal Place of Business:**

12520 83RD AVE NORTH  
SEMINOLE, FL 33776 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 530606  
ST PETERSBURG, FL 33747 US

**New Mailing Address:**

FEI Number: 04-3701604      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CERCEK, LISA  
1736 ADAMS CIR S.  
LARGO, FL 33771 US

**Name and Address of New Registered Agent:**

CERCEK, LISA  
19455 GULF BLVD.  
8A  
INDIAN SHORES, FL 33785 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: LISA CERCEK

03/03/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SPRUILL, MARLA  
Address: 12520 83 AVE N.  
City-St-Zip: SEMINOLE, FL 33776

Title: T  
Name: CERCEK, LISA  
Address: 1736 ADAMS CIRCLE S  
City-St-Zip: LARGO, FL 33771

Title: P  
Name: DESMARIS, CHICKY  
Address: 12520 83RD AVENUE NORTH  
City-St-Zip: SEMINOLE, FL 33776

Title: D  
Name: FUNK, JEN  
Address: 5670 28 ST S #194  
City-St-Zip: ST. PETE, FL 33712

Title: D  
Name: SMITH, MARY  
Address: 1103 9TH CIR SE  
City-St-Zip: LARGO, FL 33771

Title: D  
Name: NOLLER, DORTHY  
Address: 9925 ULMERTON RD. #79  
City-St-Zip: LARGO, FL 33771

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: L. CERCEK

T

03/03/2012

Electronic Signature of Signing Officer or Director

Date