

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725113

Entity Name: COMMUNITY HEALTH CENTERS, INC.

Current Principal Place of Business:

110 SOUTH WOODLAND STREET
WINTER GARDEN, FL 34787

Current Mailing Address:

110 SOUTH WOODLAND STREET
WINTER GARDEN, FL 34787 US

FEI Number: 59-1480970

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SNELL, BARBARA CEO
110 SOUTH WOODLAND STREET
WINTER GARDEN, FL 34787 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CH
Name SANDERS, JOHN
Address 110 SOUTH WOODLAND STREET
City-State-Zip: WINTER GARDEN FL 34787

Title VC 1
Name RODRIGUEZ-SCOTT, MARIA
Address 110 SOUTH WOODLAND STREET
City-State-Zip: WINTER GARDEN FL 34787

Title CEO
Name SNELL, BARBARA
Address 110 SOUTH WOODLAND STREET
City-State-Zip: WINTER GARDEN FL 34787

Title TRES
Name REYES, RICHARD
Address 110 SOUTH WOODLAND STREET
City-State-Zip: WINTER GARDEN FL 34787

Title SEC
Name MCKINNEY, TIMOTHY
Address 110 SOUTH WOODLAND STREET
City-State-Zip: WINTER GARDEN FL 34787

Title CFO
Name MARK, DICKINSON
Address 110 SOUTH WOODLAND STREET
City-State-Zip: WINTER GARDEN FL 34787

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: BARBARA SNELL

CEO

03/31/2014

Electronic Signature of Signing Officer/Director Detail

Date