2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2015
Secretary of State
CC8296145910

DOCUMENT# 729802

Entity Name: LIFESOUTH COMMUNITY BLOOD CENTERS, INC.

Current Principal Place of Business:

4039 NEWBERRY ROAD
GAINESVILLE, FL 32607

Current Mailing Address:

4039 NEWBERRY ROAD
GAINESVILLE, FL 32607

FEI Number: 59-1545914

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KINSELL, KIMBERLY E ESQ.
4039 NEWBERRY ROAD
GAINESVILLE, FL 32607 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: KIMBERLY E. KINSELL 02/12/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CD
Name	BAKER, PHILIP H
Address	4039 NEWBERRY ROAD
City-State-Zip:	GAINESVILLE FL 32607

Title	VCD
Name	BYRD, REEVES HJR
Address	4039 NEWBERRY ROAD
City-State-Zip:	GAINESVILLE FL 32607

Title	TD
Name	KELLY, JAMES
Address	4039 NEWBERRY ROAD
City-State-Zip:	GAINESVILLE FL 32607

Title	SD
Name	SPITZNAGEL, RONALD J
Address	4039 NEWBERRY ROAD
City-State-Zip:	GAINESVILLE FL 32607

Title	CEO
Name	ECKERT, NANCY
Address	4039 NEWBERRY ROAD
City-State-Zip:	GAINESVILLE FL 32607

Title	CFO
Name	GREBE, PAUL
Address	4039 NEWBERRY ROAD
City-State-Zip:	GAINESVILLE FL 32607

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: NANCY ECKERT CEO 02/12/2015

Electronic Signature of Signing Officer/Director Detail — Date