

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739019

**Entity Name:** SUNCOAST COMMUNITY HEALTH CENTERS, INC.

**Current Principal Place of Business:**

13110 ELK MOUNTAIN DR.  
RIVERVIEW, FL 33579

**Current Mailing Address:**

13110 ELK MOUNTAIN DR.  
RIVERVIEW, FL 33579

**FEI Number:** 59-1741303

**Certificate of Status Desired:** Yes

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

HERREMANS, BRADLEY PC.E.O  
13110 ELK MOUNTAIN DR.  
RIVERVIEW, FL 33579 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 CHAIRMAN  
Name GARCIA, CARLOS  
Address P. O. BOX 234  
City-State-Zip: BALM FL 33503

Title SECRETARY  
Name SHANAHAN, NINA  
Address 12926 FENNWAY RIDGE DR.  
City-State-Zip: RIVERVIEW FL 33579

Title VC  
Name ARELLANO, MARTHA L  
Address 800 CARILLON PARKWAY, STE 100  
City-State-Zip: ST. PETERSBURG FL 33716

Title TREASURER  
Name LEWIS, CHARLIE  
Address 1321 SHERIDAN BAY DRIVE  
City-State-Zip: RUSKIN FL 33570

*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:** CARLOS GARCIA

CHAIRMAN

01/08/2014

Electronic Signature of Signing Officer/Director Detail

Date