

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756562

Entity Name: HEALTH CENTRAL FOUNDATION, INC.

Current Principal Place of Business:

1414 KUHL AVENUE, MP2
ATTN: MILDRED BEAM, ESQ
ORLANDO, FL 32806

Current Mailing Address:

1414 KUHL AVENUE
ATTEN: PRESIDENT
ORLANDO, FL 32806 US

FEI Number: 59-2091206

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEAM, MILDRED D
1414 KUHL AVENUE
MP2
ORLANDO, FL 32806 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 PRESIDENT
Name BOZARD, JOHN H
Address 1414 KUHL AVE MP2
City-State-Zip: ORLANDO FL 32806

Title VP
Name JENSEN, KAREN L
Address 1414 KUHL AVE
City-State-Zip: ORLANDO FL 32806

Title VP
Name BEAM, MILDRED
Address 1414 KUHL AVENUE
MP2
City-State-Zip: ORLANDO FL 32806

Title V
Name GAMBLE, JEREMY F
Address 1414 KUHL AVE
City-State-Zip: ORLANDO FL 32806

Title VP
Name LILLY, MATT
Address 1414 KUHL AVENUE
City-State-Zip: ORLANDO FL 32806

Title CFO
Name MILLER, CHRISTOPHER
Address 1414 KUHL AVENUE
City-State-Zip: ORLANDO FL 32806

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: JOHN BOZARD

P

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date