

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005797

Entity Name: ALDERSGATE HEALTHCARE, INC.

Current Principal Place of Business:

5300 W 16TH AVENUE
HIALEAH, FL 33012

Current Mailing Address:

5300 W 16TH AVENUE
HIALEAH, FL 33012

FEI Number: 16-1676092

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: RICHARD FLYNN

03/08/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name ROUDENBUSH, JAKE
Address 5300 WEST 16TH AVE.
City-State-Zip: HIALEAH FL 33012

Title PRESIDENT
Name PRUITT, JONAH
Address 5300 WEST 16TH AVE.
City-State-Zip: HIALEAH FL 33012

Title SECRETARY
Name STEWART, GERTRUDE
Address 5300 W 16TH AVENUE
City-State-Zip: HIALEAH FL 33012

Title TREASURER
Name NICHOLS, DENNIS
Address 5300 W 16TH AVENUE
City-State-Zip: HIALEAH FL 33012

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: JONAH PRUITT

PRESIDENT

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date