## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012303

Entity Name: LIBERTY COMMUNITY HEALTH CARE, INC.

FILED Apr 30, 2018 Secretary of State CC2752649586

## **Current Principal Place of Business:**

17316 NE SR 65 HOSFORD, FL 32334

## **Current Mailing Address:**

P.O. BOX 175

HOSFORD, FL 32334 US

FEI Number: 38-3889502 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

HOWLAND, PEGGY DEASON 20277 NE HENTZ AVE BLOUNTSTOWN, FL 32424 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: PEGGY DEASON HOWLAND 04/30/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN Title CO-CHAIR

Name FORD, STEPHEN Name ODUM, DAVID

Address 11472 NW FORD FARM TRAIL Address 18309 NE FRANK WILLIAMS LANE

City-State-Zip: BRISTOL FL 32321 City-State-Zip: BLOUNTSTOWN FL 32424

Title **SECRETARY** Title **TREASURER** Name MATOS, JOSUE CLARK, MICHAEL Name Address 17316 NE SR 65 Address PO BOX 759 HOSFORD FL 32334 City-State-Zip: City-State-Zip: HOSFORD FL 32334

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: STEPHEN FORD CHAIRMAN