2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009381

Entity Name: MYCLINIC INC.

Current Principal Place of Business:

6405 W. INDIANTOWN ROAD B

JUPITER, FL 33458

Current Mailing Address:

6405 W. INDIANTOWN ROAD B JUPITER, FL 33458 US

FEI Number: 80-0653642 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PEPPER, AMY L 6405 W. INDIANTOWN ROAD B JUPITER, FL 33458 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: AMY L PEPPER 03/14/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR BRANDT, STACEY Name Name BROWN, DOUG

6405 W. INDIANTOWN ROAD B 6405 W. INDIANTOWN ROAD B Address Address

City-State-Zip: JUPITER FL 33458 JUPITER FL 33458 City-State-Zip:

Title DIRECTOR Title VC

Name LAMBRECHT, NANCY COURIS, JOHN D Name

Address 6405 W. INDIANTOWN ROAD B Address 6405 W. INDIANTOWN ROAD B

JUPITER FL 33458 City-State-Zip: City-State-Zip: JUPITER FL 33458

Title **CHAIRMAN** Title **SECRETARY**

Name SUROWITZ, RON DR. Name PEPPER, AMY L

Address 6405 W. INDIANTOWN ROAD B Address 6405 W. INDIANTOWN ROAD B

City-State-Zip: JUPITER FL 33458 JUPITER FL 33458 City-State-Zip:

Title **TREASURER** Title DIRECTOR

Name CORDERO, SUZANNE HEARING, DONALDSON Name

6405 W. INDIANTOWN ROAD B Address 6405 W. INDIANTOWN ROAD B Address

City-State-Zip: JUPITER FL 33458 City-State-Zip: JUPITER FL 33458

Continues on page 2

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.

03/14/2016 SIGNATURE: AMY PEPPER SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 14, 2016

Secretary of State

CC6557465905

Officer/Director Detail Continued:

Title DIRECTOR

Name DROURR, CATHY DR.

Address 6405 W. INDIANTOWN ROAD B

City-State-Zip: JUPITER FL 33458