

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010374

Entity Name: ACCESS MANAGED CARE, INC.

Current Principal Place of Business:

590 WOODBINE WAY
APT. #516
RIVIERA BEACH, FL 33418

Current Mailing Address:

590 WOODBINE WAY, APT. 516
RIVIERA BEACH, FL 33418

FEI Number: 46-4132095

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD., SUITE A
TAMPA, FL 33612 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 P
Name SEABROOKS, JOLANDER
Address 590 WOODBINE WAY, APT. 516
City-State-Zip: RIVIERA BEACH FL 33418

Title S
Name HARRIS-FORESTER, SHAKIA
Address 590 WOODBINE WAY
APT. #516
City-State-Zip: RIVIERA BEACH FL 33418

Title T
Name CHAMBERS, SHAKEELAH
Address 590 WOODBINE WAY
APT. #516
City-State-Zip: RIVIERA BEACH FL 33418

Title D
Name SEABROOKS, JOLANDER
Address 590 WOODBINE WAY APT. #516
City-State-Zip: RIVIERA BEACH FL 33418

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: JOLANDER SEABROOKS

D

03/21/2016

Electronic Signature of Signing Officer/Director Detail

Date