

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H88352

**Entity Name:** PANAMA CITY HEALTH CARE CENTER, INC.

**Current Principal Place of Business:**

701 BRICKELL AVENUE  
SUITE 2050  
MIAMI, FL 33131

**Current Mailing Address:**

701 BRICKELL AVENUE  
SUITE 2050  
MIAMI, FL 33131

**FEI Number:** 59-2598053

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRIEDBAUER, ROGER  
701 BRICKELL AVENUE  
SUITE 2050  
MIAMI, FL 33131 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 ROBENALT, JOHN F  
Address 505 VELASQUEZ DR  
City-State-Zip: OSPREY FL 34229

Title VPS  
Name FRIEDBAUER, ROGER  
Address 701 BRICKELL AVENUE  
SUITE 2050  
City-State-Zip: MIAMI FL 33131

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROGER FRIEDBAUER

VP

02/04/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date