

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L78953

**Entity Name:** AMAZON HEALTH COMPANY

**Current Principal Place of Business:**

4455 N. MILITARY TRAIL  
SUITE 200  
JUPITER, FL 33458

**Current Mailing Address:**

4455 N. MILITARY TRAIL  
SUITE 200  
JUPITER, FL 33458

**FEI Number:** 65-0199738

**Certificate of Status Desired:** No

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

HACKNEY, ROBERT CESQ  
HACKNEY LAW PA  
1061 E INDIANTOWN RD STE 400  
JUPITER, FL 33477 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 PD  
Name EASTERLING, JOHN  
Address 4455 N MILITARY TRAIL STE. 200  
City-State-Zip: JUPITER FL 33458

Title D  
Name HAWVER, JAMES J  
Address 4455 N. MILITARY TRAIL STE. 200  
City-State-Zip: JUPITER FL 33458

Title D  
Name MALCOLM, JAMES  
Address 4455 N MILITARY TRAIL STE. 200  
City-State-Zip: JUPITER FL 33458

Title TD  
Name FONTAINE, JEFF  
Address 4455 N MILITARY TRAIL STE. 200  
City-State-Zip: JUPITER FL 33458

*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:** ROBERT C. HACKNEY

**ATTY**

**03/27/2013**

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

\_\_\_\_\_  
Date