

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003507

Entity Name: ABILITY HEALTH SERVICES, INC.

Current Principal Place of Business:

1200 LEXINGTON GREEN LANE
SANFORD, FL 32771

Current Mailing Address:

1200 LEXINGTON GREEN LANE
SANFORD, FL 32771

FEI Number: 48-1254248

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALICZER, JAMES SESQ
HALICZER, PETTIS & SCHWAMM, P.A.
100 SE THIRD AVE 7TH FL
FORT LAUDERDALE, FL 73394 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 TRACEY, MARK
Address 1641 SE 39TH TERRACE
City-State-Zip: CAPE CORAL FL 33904

Title VP
Name GUERRINA, JOHN
Address 1200 LEXINGTON GREEN LANE
City-State-Zip: SANFORD FL 32771

Title SECRETARY
Name LOPES, PAUL
Address 1200 LEXINGTON GREEN LANE
City-State-Zip: SANFORD FL 32771

Title OFFICER
Name CIANCOTTO, DONNA
Address 1200 LEXINGTON GREEN LANE
City-State-Zip: SANFORD FL 32771

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: MARK TRACEY

PRESIDENT

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date