

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000077018

**Entity Name:** SENTINEL HEALTH SERVICES INC.

**Current Principal Place of Business:**

1150 NW 72ND AVE TOWER I STE 455 #861  
MIAMI, FL 33126

**Current Mailing Address:**

1150 NW 72ND AVE TOWER I STE 455 #861  
MIAMI, FL 33126 US

**FEI Number: 84-3372243**

**Certificate of Status Desired: No**

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

LEGALINC CORPORATE SERVICES INC.  
5237 SUMMERLIN COMMONS  
SUITE 400  
FORT MYERS, FL 33907 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 DIRECTOR, PRESIDENT,  
TREASURER, SECRETARY

Name HERDELL, WAYNE

Address 1150 NW 72ND AVE TOWER I STE 455  
#861

City-State-Zip: MIAMI FL 33126

Title DIRECTOR, VP

Name TURNER, DEXTER EARL

Address 10150 BELLE RIVE BLVD UNIT 605

City-State-Zip: JACKSONVILLE FL 32256

*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: WAYNE HERDELL**

**PRESIDENT**

**03/16/2022**

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

\_\_\_\_\_  
Date