

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000004952

**FILED**  
**Jan 14, 2014**  
**Secretary of State**  
**CC7817246896**

**Entity Name:** THE PARACELTUS GROUP, INC.

**Current Principal Place of Business:**

1830 WOODPOINTE DR.  
WINTER HAVEN, FL 33884

**Current Mailing Address:**

1830 WOODPOINTE DR.  
WINTER HAVEN, FL 33884

**FEI Number:** 23-2973243

**Certificate of Status Desired:** No

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

JENKINS, ROBERT E  
1830 WOODPOINTE DR.  
WINTER HAVEN, FL 33884 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 DP  
Name JENKINS, ROBERT E  
Address 1830 WOODPOINTE DR.  
City-State-Zip: WINTER HAVEN FL 33884

Title D  
Name MADAN, LEWIS  
Address 22 FOX LANE  
City-State-Zip: UNION SPRINGS NY 13160

Title D  
Name GOSCINSKY, MICHAEL  
Address 69 CAPTAIN SHANKEY DRIVE  
City-State-Zip: GARNERVILLE NY 10923

Title DV  
Name LAZAR, PAUL M  
Address 5 ROCKCRESS WAY  
City-State-Zip: MT LAUREL NJ 08054

Title DSTQ  
Name JENKINS, LINDA J  
Address 1830 WOODPOINTE DR.  
City-State-Zip: WINTER HAVEN FL 33884

Title DIRECTOR  
Name JENKINS, DERON M.  
Address 6477 ATLANTIC AVENUE  
APT S 244  
City-State-Zip: LONG BEACH CA 90805

*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:** ROBERT E. JENKINS

**PRESIDENT**

**01/14/2014**

Electronic Signature of Signing Officer/Director Detail

Date