

**2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Apr 13, 2023**

**Secretary of State**

**3466236788CC**

DOCUMENT# P36530

**Entity Name:** ACCESSIA HEALTH INC.

**Current Principal Place of Business:**

3104 E. BOUNDARY CT.  
MIDLOTHIAN, VA 23112

**Current Mailing Address:**

P. O. BOX 5930  
MIDLOTHIAN, VA 23112

**FEI Number: 54-1596178**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 SECRETARY  
Name LANDRY, BRIAN  
Address 3104 E. BOUNDARY COURT  
City-State-Zip: MIDLOTHIAN VA 23112

Title CEO  
Name COOPER, GWEN  
Address 3104 EAST BOUNDARY COURT  
City-State-Zip: MIDLOTHIAN VA 23112

Title TREASURER  
Name PHILLIPS, RUSSELL E JR.  
Address 3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112

Title DIRECTOR  
Name GLASS, TERRIE L  
Address 3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112

Title DIRECTOR  
Name MULA, MITCH  
Address 3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112

Title DIRECTOR  
Name FINK, BRIAN  
Address 3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112

Title DIRECTOR  
Name GLOEDE, DENISE  
Address 3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112

Title DIRECTOR  
Name KIMBROUGH, LUD  
Address 3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112

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*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: GWEN COOPER**

**PRESIDENT & CEO**

**04/13/2023**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            SMITH, LEE  
Address        3104 E. BOUNDARY CT.  
City-State-Zip: MIDLOTHIAN VA 23112