

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004968

Entity Name: RENNOVA HEALTH, INC.**Current Principal Place of Business:**400 SOUTH AUSTRALIAN AVENUE, SUITE 800
WEST PALM BEACH, FL 33401**Current Mailing Address:**400 SOUTH AUSTRALIAN AVENUE, SUITE 800
WEST PALM BEACH, FL 33401 US**FEI Number:** 68-0370244**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 C
Name MIKA, THOMAS R
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title DCEOP
Name LAGAN, SEAMUS
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name BILLINGS, PAUL DR
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name DIAMANTIS, CHRISTOPHER
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title CFO
Name ADAMS, JASON P
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title S
Name SAINSBURY, SEBASTIEN
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name FRANK, BENJAMIN
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name GOLDBERG, MICHAEL L
Address 400 SOUTH AUSTRALIAN AVENUE,
SUITE 800
City-State-Zip: WEST PALM BEACH FL 33401

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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SEAMUS LAGAN**PRESIDENT****03/18/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D
Name	LEE, ROBERT
Address	400 SOUTH AUSTRALIAN AVENUE, SUITE 800
City-State-Zip:	WEST PALM BEACH FL 33401