

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 564944

FILED
Feb 20, 2012
Secretary of State

Entity Name: ADCAHB MEDICAL COVERAGES, INC.

Current Principal Place of Business:

3000 NW 101 LANE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3000 NW 101 LANE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-1787780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OATES, DANIEL
1500 E ATLANTIC BLVD
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: CLATSOFF, W ADAM
Address: 3000 NW 101 LANE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP
Name: CLATSOFF, BILL
Address: 3000 NW 101 LANE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S/TR
Name: DOUCETTE, HEATHER
Address: 3000 NW 101 LANE
City-St-Zip: CORAL SPRINGS, FL 33065

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: HEATHER DOUCETTE

S/TR

02/20/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date