2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006
Secretary of State

DOCUMENT# 720924

Entity Name: COMMUNITY HEALTH OF SOUTH DADE, INC.

Current Principal Place of Business:

10300 S.W. 216 STREET
MIAMI, FL 33190

New Principal Place of Business:

Current Mailing Address:

10300 S.W. 216 STREET
MIAMI, FL 33190

New Mailing Address:

FEI Number: 59-1372690 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARTLEY, BRODES H JR.
10300 S W 216 STREET
MIAMI, FL 33190 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:	V	( ) Delete
Name:	BROWN, FRIEDA	
Address:	10370 SW 146 STREET	
City-St-Zip:	MIAMI, FL 33176	
Title:	T	( ) Delete
Name:	WULF, KARLETON	
Address:	17435 SW 90 AVENUE	
City-St-Zip:	MIAMI, FL 33157	
Title:	V	( ) Delete
Name:	TORRENS, LUIS M	
Address:	14300 SW 236 STREET	
City-St-Zip:	HOMESTEAD, FL 33032	
Title:	S	( ) Delete
Name:	CARTER, JOAN P	
Address:	17701 SW 112 PL	
City-St-Zip:	MIAMI, FL 33157	
Title:	C	( ) Delete
Name:	BRADY, LEONARD	
Address:	3872 NW 176 TERRACE	
City-St-Zip:	MIAMI, FL 33055	
Title:	P	( ) Delete
Name:	HARTLEY, BRODES H JR	
Address:	7800 SW 170 STREET	
City-St-Zip:	MIAMI, FL 33157	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	YOUNG, DAVID	
Address:	5963 N.W. 201 TERRACE	
City-St-Zip:	MIAMI, FL 33015	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	POPE, LIZZIERENE	
Address:	10720 SW 222 DRIVE	
City-St-Zip:	MIAMI, FL 33170	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRODES H. HARTLEY, JR. P 03/01/2006

Electronic Signature of Signing Officer or Director — Date