

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726870

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA HEALTH CARE, INC.

**Current Principal Place of Business:**

950 CR 17A WEST  
AVON PARK, FL 33825

**New Principal Place of Business:**

**Current Mailing Address:**

950 CR 17A WEST  
AVON PARK, FL 33825

**New Mailing Address:**

**FEI Number:** 59-1404594

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DUKE, DAVID A  
950 CR17A WEST  
AVON PARK, FL 33825 US

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

TYLER, HERMAN R  
950 CR17A WEST  
AVON PARK, FL 33825 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: HERMAN ROY TYLER

03/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: TYLER, HERMAN R  
Address: 1103 AVENUE E  
City-St-Zip: HAINES CITY, FL 33844 US

Title: VCD  
Name: CLAUSSEN, ANN  
Address: 6916 HAYTER DR  
City-St-Zip: LAKELAND, FL 33813 US

Title: SD  
Name: BOYD, DEBORAH R  
Address: 9775 SR 64W  
City-St-Zip: ONA, FL 33865 US

Title: TD  
Name: GARRISON, DAPHNE  
Address: 1818 CROSSROADS  
City-St-Zip: WINTER HAVEN, FL 33884

Title: PD  
Name: SINGH-PRATT, CAROL  
Address: 2131 N TERRAPIN ROAD  
City-St-Zip: AVON PARK, FL 33825

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: W GAYE WILLIAMS

CEO

03/29/2011

Electronic Signature of Signing Officer or Director

Date