

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731681

FILED  
Mar 17, 2010  
Secretary of State

**Entity Name:** JUDEO-CHRISTIAN HEALTH CLINIC, INC.

**Current Principal Place of Business:**

4118 N MACDILL AVE  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

4118 N MACDILL AVE  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 59-1605647

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAUMANN, PHILLIP  
512 E. KENNEDY BLVD.  
SUITE 1500  
TAMPA, FL 33602 US

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

CAMPBELL, SYLVIA  
217 SOUTH MATANZAS AVE.  
TAMPA, FL 33609 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: SYLVIA CAMPBELL, M.D.

03/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: V  
Name: ALVAREZ, MANUEL  
Address: 4144 NORTH ARMENIA AVENUE  
City-St-Zip: TAMPA, FL 33607

Title: PD  
Name: CAMPBELL, SYLVIA M.D.  
Address: 217 S. MATANZAS  
City-St-Zip: TAMPA, FL

Title: SD  
Name: GARCIA, FRANK J  
Address: 2318 W. COLUMBUS DR.  
City-St-Zip: TAMPA, FL 33607

Title: ED  
Name: BELL, KELLY  
Address: 4118 N. MACDILL AVE.  
City-St-Zip: TAMPA, FL 33607

Title: BMAD  
Name: BAUMANN, PHILLIP A  
Address: 100 S ASHLEY DR SUITE 1500  
City-St-Zip: TAMPA, FL 33602

Title: T  
Name: DEBEVOISE, JOHN  
Address: 3501 SAN JOSE  
City-St-Zip: TAMPA, FL 33629

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: KELLY BELL

ED

03/17/2010

Electronic Signature of Signing Officer or Director

Date