

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854175

FILED
Feb 14, 2012
Secretary of State

Entity Name: SUNBELT HEALTH CARE CENTERS, INC.

Current Principal Place of Business:

602 COURTLAND STREET
STE 200
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

602 COURTLAND STREET
STE 200
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 58-1473135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROMME, JEFF
900 HOPE WAY
ALTAMONTE SPRINGS, FL 32714 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: AS
Name: RODMAN, DAVID
Address: 602 COURTLAND STREET, SUITE 200
City-St-Zip: ORLANDO, FL 32804

Title: AS
Name: MCMULLEN, ROBERT
Address: 602 COURTLAND STREET, SUITE 200
City-St-Zip: ORLANDO, FL 32804

Title: CD
Name: HENDERSCHIEDT, ROBERT R
Address: 900 HOPE WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: AS
Name: ADDISCOTT, LYNN
Address: 900 HOPE WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PD
Name: GIVENS, MICHELLE
Address: 602 COURTLAND STREET STE 200
City-St-Zip: ORLANDO, FL 32804

Title: AS
Name: DE PRADA, ARIEL
Address: 900 HOPE WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: ARIEL DE PRADA

AS

02/14/2012

Electronic Signature of Signing Officer or Director

Date

854175
2/14/12

**Sunbelt Health Care Centers, Inc.
Board of Directors and Officers**

December 31, 2011

Directors

Roger Anderson
380 S. SR 434, #1004-151
Altamonte Springs, FL 32714

Thomas Evans
12501 Old Columbia Pike
Silver Springs, MD 20904

Michelle Givens
602 Courtland Street, Suite 200
Orlando, FL 32804

Robert R. Henderschedt, **Chairman**
900 Hope Way
Altamonte Springs, FL 32714

Andrew McDonald
2800 N. Orlando Avenue
Orlando, Florida 32804

Paul C. Rathbun
900 Hope Way
Altamonte Springs, FL 32714

Officers

Lynn Addiscott, Assist. Secretary
900 Hope Way
Altamonte Springs, FL 32714

Mark Block, Assist. Secretary
900 Hope Way
Altamonte Springs, FL 32714

Ariel De Prada, Assist. Secretary
900 Hope Way
Altamonte Springs, FL 32714

Michelle Givens, President
602 Courtland Street, Suite 200
Orlando, FL 32804

Kent Johnson, Assist. Secretary
602 Courtland Street, Ste 200
Orlando, FL 32804

Robert E. McMullen, Assist. Secretary
602 Courtland Street, Suite 200
Orlando, FL 32804

David Rodman, Assist. Secretary
602 Courtland Street, Suite 200
Orlando, FL 32804

Michael Saunders, Assist. Secretary
900 Hope Way
Altamonte Springs, FL 32714

Terry D. Shaw, Assist. Secretary
900 Hope Way
Altamonte Springs, FL 32714

David Singleton, Assistant Secretary
900 Hope Way
Altamonte Springs, FL 32714