## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F57114

Entity Name: AMERIMED HEALTHCARE, INC.

FILED Apr 06, 2011 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2454 E MICHIGAN STREET
ORLANDO, FL 32806
2454 E MICHIGAN STREET
SUITE A

ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

2454 E MICHIGAN STREET SUITE A ORLANDO, FL 32806

FEI Number: 59-2135595 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BATES, TIMOTHY O. 7726 WHITE ASH STREET ORLANDO, FL 32819 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PSTD

Name: BATES, TIMOTHY OWEN Address: 7726 WHITE ASH ST. City-St-Zip: ORLANDO, FL

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: TIMOTHY O BATES PRES 04/06/2011