2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State
09-08-2003 90128 036 ****61.25

DOCUMENT # N02000004883

1. Entity Name
NORTHEAST FLORIDA HEALTH SERVICES, INC.

Principal Place of Business	Mailing Address
~~1955 US HWY 1 S. STE B-6~~ ~~ST AUGUSTINE FL 32086~~	~~1955 US HWY 1 S. STE B-6~~ ~~ST AUGUSTINE FL 32086~~

[redacted]

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
114 VOLUSIA AVE. Suite, Apt. #, etc.	P.O. BOX 527 Suite, Apt. #, etc.
City & State: PIERSON, FL	City & State: PIERSON, FL
Zip: 32180 Country: VOLUSIA	Zip: 32180 Country: VOLUSIA

4. FEI Number ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~FARAH, JAMES E~~ ~~3060 MERCURY RD, STE 101~~ ~~JACKSONVILLE FL 32207~~	Name: DR. JOHN A. OUTTERSON Street Address (P.O. Box Number is Not Acceptable): 820 FOREST PARK DRIVE City: DELAND FL Zip Code: 32720

8. 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. I am familiar with, and accept the obligations of registered agent.

(386) 734-0806

SIGNATURE: John A. Outterson — JOHN A. OUTTERSON — 9/5/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 10, 2003, min will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GORDY, JOSEPH 400 HEALTH PARK ST AUGUSTINE FL 32086	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition SEE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FARAH, JAMES E 3060 MERCURY RD, STE 101 JACKSONVILLE FL 32207	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition ATTACHMENT
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RILEY-MARTINEZ, JUDAS 202 GERONA RD ST AUGUSTINE FL 32086	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition

CR2E037 (4/03)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John A. Outterson — JOHN A. OUTTERSON — 9/5/2003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 90154415
#1020000004883

BOARD OF DIRECTORS NORTHEAST FLORIDA HEALTH SERVICE

9/1/2003

P/C/D
Shane Crosby
263 Highway 17
Pierson, Fl 32180
O: (386) 749-4351 H: (386) 749-1213
E-mail: crosby@totcon.com

V/VC/D
Herbert Bennett
439 N. Pine Street
Pierson, Fl 32180-2387
O: (386) 749-2524 H: (386) 749-2402
Email: twnpierson@totcon.com

S/D
Max Tyus
307 East Second Ave.
Pierson, FL 32180
O: (386) 749-4862 H: (386) 749-3453
Cell: (386) 547-1219
E-mail: max_995@msn.com

T/D
Lamar Dixon
272 W. Washington Ave.
Pierson, Fl 32180-2211
O: (386) 547-1121 H: (386) 749-2906?
Email:

M/D
Dr. John A. Outterson
820 Forest Park Drive
Post Office Box 584
DeLand, FL 32720
H: (386) 734-0806 Cell: (386) 748-6694
E-mail: joutterson@earthlink.net

D
Charles Bryant
301 S. Ridgewood Ave., Suite 230
Post Office Box 2451
Daytona Beach, FL 32115-2451
O: (386) 671-8053
E-mail: bryantcharles@ci.daytona-beach.fl.us

D
Vann Cade
2175 McBride Road
Seville, Fl 32190-7859
H: (386) 749-3211
E-mail: cadefemeries@pvns.net

D
John Walt Eddings
Vol. Cty. Health Dept., BIN# 125
1845 Holsonback Drive
Daytona Beach, FL 32117-5114
O: (386) 274-0608 H: (386) 747-4592
Cell: (386) 547-4592
E-mail: Walt_eddings@doh.state.fl.us

D
Aurora Gomez
1490 Tilly Byrd Road
Post Office Box 522
Seville, FL 32190
O: (386) 749-0924 H: (386) 749-0147
Cell: (386) 747-8745
E-mail: gomezgenesis@cs.com

Attachment

90154415

#N020000004883

D
H. Stewart McBride
464 Minshew Road
Pierson, FL 32180

H: (386) 749-2541
E-mail:

D
Jim Neely
296 Katrina Street
DeLeon Springs, FL 32130

H: (386) 717-7500
E-mail: nly1236@aol.com

D
Claudia Segura
248 Purdom Cemetery Road
Post Office Box 375
Pierson, FL 32180

O: (386) 749-1376 H: (386) 749-1376
Cell: (386) 527-4417
E-mail:

D
Mack Yelvington
320 Bennett Road
Seville, FL 32190

H: (386) 749-2627
E-mail: