2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000009155

TI FILED
Sep 22, 2009
Secretary of State

Entity Name: FLORIDA HEALTH FREEDOM COALITION, INC.

Current Principal Place of Business: New Principal Place of Business:

4897 SW 82 ST. 12164 WHITEHOUSE ROAD MIAMI, FL 33143 TALLAHASSEE, FL 32317 US

Current Mailing Address: New Mailing Address:

4897 SW 82 ST. 12164 WHITEHOUSE ROAD MIAMI, FL 33143 TALLAHASSEE, FL 32317 US

FEI Number: 55-0816743 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:

MILLER, DEBORAH J WINDHAM, BERNARD M 4897 SW 82 ST. 12164 WHITEHOUSE ROAD MIAMI, FL 33143 US TALLAHASSEE, FL 32317 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: BERNARD M WINDHAM 09/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 ROGERS, TERRY
 Name:
 WINDHAM, BERNARD M PRES.

 Address:
 315 NE 10TH ST.
 Address:
 12164 WHITEHOUSE ROAD

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 TALLAHASSEE, FL 32317

Title: () Delete Title: (X) Change () Addition Name: MILLER, DEBORAH Name: CASHMAN, LEO B SEC-TR Address: 4897 SW 82 ST. Address: 1043 GRAND AVE. #317 City-St-Zip: MIAMI, FL 33143 City-St-Zip: SAINT PAUL, MN 55105 US

Title: SD () Delete Title: VD (X) Change () Addition Name: SABER-WILLIS, BARBARA Name: FUNK, PAUL V PRES

Address: 19515 DEER LAKE RD. Address: 4362 REEVES ROAD

City-St-Zip: LUTZ, FL 33548 US City-St-Zip: NEW PORT RICHEY, FL 34652 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEO B CASHMAN ST 09/22/2009