

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007218

FILED
Aug 24, 2008
Secretary of State

Entity Name: TRI-COUNTY HEALTH ALLIANCE, INC.

Current Principal Place of Business:

1315 NW 21ST AVE
CHIEFLAND, FL 32626

New Principal Place of Business:

1315 NW 21ST AVE
SUITE 2
CHIEFLAND, FL 32626

Current Mailing Address:

1315 NW 21ST AVE
CHIEFLAND, FL 32626

New Mailing Address:

1315 NW 21ST AVE
SUITE 2
CHIEFLAND, FL 32626

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LIPNICK, JESSIE
1315 NW 21ST AVE
CHIEFLAND, FL 32626 US

Name and Address of New Registered Agent:

LIPNICK, JESSE
1315 NW 21ST AVE
SUITE 2
CHIEFLAND, FL 32626 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: JESSE LIPNICK

08/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LIPNICK, JESSE
Address: 1315 NW 21ST AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: D () Delete
Name: KEELS, DONN
Address: 1113 NW 23RD AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: D () Delete
Name: MCCOY, JR., DONALD
Address: 130 SW 7TH STREET
City-St-Zip: WILLISTON, FL 32696

Title: D () Delete
Name: REXROAT, GARY
Address: 10430 US HIGHWAY 129 S
City-St-Zip: TRENTON, FL 32693

Title: D () Delete
Name: LIDDELL, WANDA
Address: 306 NE HAY 351
City-St-Zip: CROSS CITY, FL 32628

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: LIPNICK, JESSE
Address: 1315 NW 21ST AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: DR. (X) Change () Addition
Name: BURKETT, ELIZABETH
Address: 1113 NW 23RD AVE
City-St-Zip: CHIEFLAND, FL 32626

Title: DR. (X) Change () Addition
Name: MCCOY, JR., DONALD
Address: 130 SW 7TH STREET
City-St-Zip: WILLISTON, FL 32696

Title: MR. (X) Change () Addition
Name: REXROAT, GARY
Address: 10430 US HIGHWAY 129 S
City-St-Zip: TRENTON, FL 32693

Title: MRS. (X) Change () Addition
Name: LIDDELL, WANDA
Address: 306 NE HAY 351
City-St-Zip: CROSS CITY, FL 32628

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: JESSE LIPNICK

DR.

08/24/2008

Electronic Signature of Signing Officer or Director

Date