

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010487

FILED
Apr 29, 2009
Secretary of State

Entity Name: FLORIDA HEALTH CHOICES, INC.

Current Principal Place of Business:

2727 MAHAN DRIVE, BLDG. 1, ROOM 303
TALLAHASSEE, FL 32308

New Principal Place of Business:

225 SOUTH ADAMS STREET
SUITE 250
TALLAHASSEE, FL 32301

Current Mailing Address:

2727 MAHAN DRIVE, BLDG. 1, ROOM 303
TALLAHASSEE, FL 32308

New Mailing Address:

225 SOUTH ADAMS STREET
SUITE 250
TALLAHASSEE, FL 32301

FEI Number: 26-4435356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WARRING, TOM
2727 MAHAN DRIVE, BLDG. 1, ROOM 303
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

PLANTE, KELLY B
225 SOUTH ADAMS STREET
SUITE 250
TALLAHASSEE, FL 32301 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: KELLY B. PLANTE

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Change (X) Addition
Name: BEAN, AARON
Address: 305 BONNIEVIEW ROAD
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: VCD () Change (X) Addition
Name: MEADOWS, SHERRI
Address: 8926 SW 27TH AVENUE
City-St-Zip: OCALA, FL 34476 US

Title: STD () Change (X) Addition
Name: WELLES, THERESA
Address: 7955 BERNARD STREET
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: D () Change (X) Addition
Name: MEDVEDEFF, DAVID
Address: 1000 PRIMERA BOULEVARD, SUITE 3144
City-St-Zip: LAKE MARY, FL 32746 US

Title: D () Change (X) Addition
Name: PEADEN, DURELL
Address: 598 NORTH FERDON BOULEVARD
City-St-Zip: CRESTVIEW, FL 32536 US

Title: D () Change (X) Addition
Name: MARIN, STEVE
Address: 16155 SW 117TH AVENUE, SUITE B-21
City-St-Zip: MIAMI, FL 33177 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: AARON BEAN

CD

04/29/2009

Electronic Signature of Signing Officer or Director

Date