

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010748

FILED  
Mar 01, 2012  
Secretary of State

**Entity Name:** QUALITY CIRCLE FOR HEALTHCARE, INC.

**Current Principal Place of Business:**

900 HOPE WAY  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

900 HOPE WAY  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 26-3789368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROMME, JEFF  
900 HOPE WAY  
ALTAMONTE SPRINGS, FL 32714 US

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

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:** SD  
**Name:** JOHNSON, SANDRA  
**Address:** 900 HOPE WAY  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32714

**Title:** TD  
**Name:** SCHULTZ, MICHAEL  
**Address:** 2400 BEDFORD ROAD  
**City-St-Zip:** ORLANDO, FL 32803

**Title:** CD  
**Name:** HAUCK, LORAN M.D.  
**Address:** 1035 GREENWOOD BLVD.  
**City-St-Zip:** LAKE MARY, FL 32746

**Title:** AS  
**Name:** DE PRADA, ARIEL  
**Address:** 900 HOPE WAY  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32714

**Title:** D  
**Name:** REINER, RICHARD  
**Address:** 900 HOPE WAY  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32714

**Title:** VCD  
**Name:** JAMERSON, CARLENE  
**Address:** 1035 RED BUD ROAD  
**City-St-Zip:** CALHOUN, GA 30701

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ARIEL DE PRADA

AS

03/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date

N08000010748

3-1-12

## Quality Circle for Healthcare, Inc.

### Board of Directors

Jeff Bromme  
900 Hope Way  
Altamonte Springs, FL 32714

Sheryl Dodds  
2400 Bedford Road  
Orlando, FL 32803

Loran Hauck, MD  
2400 Bedford Road  
Orlando, FL 32803

Carlene Jamerson  
1035 Red Bud Road  
Orlando, FL 30701

Sandra Johnson  
900 Hope Way  
Altamonte Springs, FL 32714

David Moorhead  
2400 Bedford Road  
Orlando, FL 32803

Richard Reiner  
900 Hope Way  
Altamonte Springs, FL 32714

Michael Schultz  
2400 Bedford Road  
Orlando, FL 32803

### Officers

Lynn Addiscott, Assist. Sec.  
900 Hope Way  
Altamonte Springs, FL 32714

Ariel De Prada, Assist. Sec.  
900 Hope Way  
Altamonte Springs, FL 32714

Loran Hauck, MD, Chairman  
2400 Bedford Road  
Orlando, FL 32803

Carlene Jamerson, Vice Chair.  
1035 Red Bud Road  
Orlando, FL 30701

Sandra Johnson, Secretary  
900 Hope Way  
Altamonte Springs, FL 32714

Michael Schultz, Treasurer  
2400 Bedford Road  
Orlando, FL 32803