2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000002638

FILED May 16, 2012 Secretary of State

05/16/2012

Entity Name: EAST BEACH FAMILY EMERGENCY DEPOT, INC.

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

4 RIDGE ROAD 740 S E 1ST STREET PAHOKEE, FL 33476 BELLE GLADE, FL 33430

Current Mailing Address: New Mailing Address:

PO BOX 127 PO BOX 3014

CANAL POINT, FL 33438 BELLE GLADE, FL 33430

FEI Number: 01-0954153 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HARRINGTON, ROSWELL ADAMS, BURLEY JR 605 S W 11TH STREET 4 RIDGE ROAD PAHOKEE, FL 33476 US BELLE GLADE, FL 33430

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: BURLEY ADAMS, JR.

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BELL-SPENCE, BARBARA Name: Address: 740 SE FIRST ST City-St-Zip: BELLE GLADE, FL 33430

Title: DVP

Name: ROBERTS, TED

Address: 4510 PORTOFINO WAY, APT, 23 City-St-Zip: WEST PALM BEACH, FL 33409

Title: DST

SHARPE, SYLVIA Name: 8276 BLUE CYPRESS DR. Address: City-St-Zip: LAKE WORTH, FL 33467

Title:

Name: COLLINS, WALTER Address: 623 S E 3RD STREET City-St-Zip:

BELLE GLADE, FL 33430

Title:

LEWIS, AUSTIN Name: 612 S W 11TH STREET Address: BELLE GLADE, FL 33430 City-St-Zip:

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: BARBARA SPENCE DP 05/16/2012