

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006882

FILED
Apr 17, 2011
Secretary of State

Entity Name: HEALTH CENTERS UNITED INC.

Current Principal Place of Business:

2881 TELSTAR AVENUE
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

PO BOX 555663
ORLANDO, FL 32855

New Mailing Address:

FEI Number: 80-0643858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATKINSON, WILLIAM DR.
2881 TELSTAR AVENUE
ORLANDO, FL 32805 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: CEO
Name: ATKINSON, WILLIAM A DR
Address: 2881 TELSTAR AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: VPGC
Name: ATKINSON, WAYNE JD
Address: 2881 TELSTAR AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: PRES
Name: DANIEL, RONALD
Address: 8087 SORRENTO LANE
City-St-Zip: NAPLES, FL 34114

Title: D
Name: ATKINSON, GLORIA
Address: 2881 TELSTAR AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: D
Name: BELIAN, RAFFI
Address: 5980 ROCHESTER RD
City-St-Zip: TROY, MI 48085

Title: CFO
Name: OSIMEN, CHRIS
Address: 1209 LINEBAUGH AVE
City-St-Zip: TAMPA, FL 33612

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: DR.WILLIAM ATKINSON

CEO

04/17/2011

Electronic Signature of Signing Officer or Director

Date