

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006309

FILED
Apr 27, 2012
Secretary of State

Entity Name: FLORIDA CURE INCORPORATED

Current Principal Place of Business:

2143 ERNEST STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 40934
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 45-2795350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FINN-SCHULTZ, PATRICK
2143 ERNEST STREET
JACKSONVILLE, FL 32204 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: D
Name: FINN-SCHULTZ, PATRICK
Address: 2143 ERNEST STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: PULLELLA, AMY
Address: 4325 16TH STREET NE
City-St-Zip: NAPLES, FL 34120

Title: D
Name: KRUGER, PAUL
Address: 132 PARK AVENUE
City-St-Zip: INTERLACHEN, FL 32148

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: PATRICK FINN-SCHULTZ

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date