Inc. pall Place of Business Matting Address Process Place of Business Operative Control Status Operative Control Status Do Not Write In THIS SPACE Principal Place of Business 1. Multing Address Status Clip & State Or Do Not Write In THIS SPACE Do Not Write In THIS SPACE Other Act, etc. State, Apt #, etc. Clip & State 4. FEI Nother 7:0 Country 0. Name and Address of New Registered Agent 7. Manne and Address of New Registered Agent 7:0 Country 0. Name and Address of Countert Registered Agent 7. Manne and Address of New Registered Agent 7:0 Country 8. Centificate of Setus Design # ROBUCK, H.D.JR ESO State Registered Agent Agent # 7. Manne and Address of New Registered Agent The above named entry submits the statement for the purpose of changing the registered offico or negative name and Address of Florida. Manne State N ST . Election Campaign Finorchig State Not Net Net Net Net Net Net Net Net Net Ne	2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N13443 1. Entity Name CENTRAL FLORIDA HEALTH CARE DEVELOPMENT CORPORAT				FILED Mar 27, 2000 8:00 am Secretary of State 03-27-2000 90101 050 ****70.00			
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SURF, Apl. #. etc. Suite. Apl. #. etc. DD NOT WRITE IN THIS SPACE City & State City & State City & State 4. FE: Number Sp2635190 More Applied For Zip Country Zip Country S. Centificate of Status Desired State State Incr Applied For Item and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Fee Required Item and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent FEE ROBUCK, H.D.JR ESO Street Address (PO. Box Namber is Not Acceptable) Street Address (PO. Box Namber is Not Acceptable) Street Address (PO. Box Namber is Not Acceptable) The above named entry submits this statement for the purpose of changing its registered discord registered agent, or but, in the state of Finds. Street Address (PO. Box Namber is Not Acceptable) Street Address (PO. Box Namber is Not Acceptable) Inter Find Contribution Street Address (PO. Box Namber is Not Acceptable to Department of State Brue ROW: PEE Is \$61.25 9. Electable Dotte International Control State Dotte International Control State State Address State Int D David Unit D <td>CORPORATE OFFICE 00 E. DIXIE AVE. EESBURG FL 34748</td> <td>600 E. DIXIE AVE.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	CORPORATE OFFICE 00 E. DIXIE AVE. EESBURG FL 34748	600 E. DIXIE AVE.						
City & State City & State 4. FEI Number S9265190 Applied For Zip Country Zip Country 5. Certificate of Status Desired S1275 Auditional ROBUCK H D /R ESO 310 E MAIN ST EEESDURG FL 94748 1. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent The ancore named entity submits this statement for the purpose of changing for registered office or registered agent, or both, in the state of Fince Agent Spatial State Stat	2. Principal Place of Business	3. Mailing Address						
State State <th< td=""><td>Suite, Apt. #, etc.</td><td>Suite, Apt. #, etc.</td><td></td><td></td><td>DO</td><td>NOT WRITE IN THIS</td><td>SPACE</td><td></td></th<>	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO	NOT WRITE IN THIS	SPACE	
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Stational Free Required 0. Name and Address of Oursent Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent ROBUCK, H D JR ESQ SUBCK, H D JR ESQ Sub E MAN ST LEESBURG FL 34748 Name Name Name City FL Zip Code The above named antity submits the statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. City FLE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution \$55.00 May Be Added to Press Make Check Payable to Department of State If is estimated agent, instate pay to press and the statement for the purpose of changing financing Trust Fund State \$50.00 May Be Added to Press Make Check Payable to Department of State If is estimated agent, instate pay to press and the statement for the purpose of changing financing Trust Fund State 11. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS 11. Dav L PL PL PL	City & State	City & State		· · · ,	4. FEI Number 59-20	635190		
Name Name Street Address (PO. Box Number is Not Acceptable) Site E MARK ST. ELESSURG FL 34748 The above named entity submits this statement for the purpose of changing its registered defice or registered agent, or both, in the state of Florida. GNATURE	Zip Country	Zip	Country		5. Certificate of Status	Desired 📑	\$8.75 Additio	,
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