## 2008 NOT-FOR-PROFIT CORPORATION

## FILED Apr 23, 2008 8:00 am Secretary of State

ANNUAL REPORT	OICATION
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DOCUMENT # N19907  1. Entity Name HALIFAX HEALTH CARE SYSTEMS, INC.						04-23-2008 90046 023 **					61.25
303 N. CLYDE MORRIS BLVD. 303 ATTN: GENERAL COUNSEL ATT		ATTN: GENERAL COUN	Mailing Address 303 n. Clyde Morris Blvd. Attn: General Counsel Daytona Beach, Fl 32114 US					1081 E1011 DIE11 E1			
Principal Place of Business - No P.O. Box #     3. Mailing Addr			3. Mailing Address				.				
Suite, Apt. #, etc. Su		Suite, Apt. #, etc.	luite, Apt. #, etc.		·	02262008	Chg-NP	CR2E0	37 (12/06)		
City & State		City & State	City & State			4. FEI Number 59-2898			<del></del>	plied For at Applicable	
Zip		Country	Zip	Cou	intry		5. Certificate o	f Status Desired	a 🗆	\$8.75 Add	ditional
	6. Name a	and Address of Current R	legistered Agent	٠			7. Name and A	ddress of Nev	v Registered	Agent	
		•			Name						
DAVIDSON	YDE MORE	RIS BLVD.			Street A	ddress (1	P.O. Box Number	is Not Accepta	ible)		
DAYTONA	N BEACH, F	FL 32114			<u>.</u>						
					City			•	FL	Zip Cod	
8. The above the obligat	named entity tions of registe	submits this statement for ered agent.	the purpose of changing its	registere	ed office o	r register	ed agent, or both	, in the State of	Florida. I am	familiar with,	and accept
0.051471107											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
		e is \$61.25 ay 1, 2008	9. Election Ca Trust Fund	mpaign F	inancing		\$5.00 May Be Added to Fees	F	9.534	k payable t	
10.			9. Election Ca Trust Fund	mpaign F	inancing		\$5.00 May Be	F	Make chec lorida Depa	rtment of S	tate
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