

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44499

FILED
Feb 12, 2009
Secretary of State

Entity Name: HEALTHPARK CARE CENTER, INC.

Current Principal Place of Business:

16131 ROSERUSH COURT
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

2776 CLEVELAND AVENUE
FT MYERS, FL 33901

New Mailing Address:

2776 CLEVELAND AVENUE
LEGAL MOC 459
FT MYERS, FL 33901

FEI Number: 65-0319983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGILLICUDDY, MARY A
C/O LEE MEMORIAL HOSPITAL
2776 CLEVELAND AVE
FORT MYERS, FL 33902 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: S () Delete
Name: BARRETT, LOIS
Address: 8701 ESTERO BL SUITE 607
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: C () Delete
Name: DONALDSON, JOHN D MD
Address: 3487 BROADWAY
City-St-Zip: FORT MYERS, FL 33901

Title: T () Delete
Name: AKIN, RICHARD
Address: 1220 WESTFIELD DR
City-St-Zip: FORT MYERS, FL 33919

Title: VC () Delete
Name: MCGOVERN, NANCY
Address: 785 SOUTH ENTRADA DR
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BARRETT, LOIS C
Address: 8701 ESTERO BL SUITE 607
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: C (X) Change () Addition
Name: AKIN, RICHARD B
Address: 1220 WESTFIELD DR
City-St-Zip: FORT MYERS, FL 33919

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD B AKIN

C

02/12/2009

Electronic Signature of Signing Officer or Director

Date