2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002644

FILED Mar 06, 2009 Secretary of State

Entity Name: NORTHEAST FLORIDA AREA HEALTH EDUCATION CENTER, INC.

Current Principal Place of Business:			New Principal Place of Business:			
107 MYR	A STREET					
JITE 250						
CKSON	NVILLE, FL 322	204				
current Mailing Address:			New Mailing Address:			
107 MYR	A STREET					
JITE 250)					
CKSON	NVILLE, FL 322	204				
I Number	: 59-3200731	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Des	sired (X)
ame and	d Address of (Current Registered Agent:	Name and	l Address of	New Registered Agen	t:
	SON, BARBAI	RA PHD				
UITE 102	43RD ST					
	z ILLE, FL 3260:	8 US				
	ILLL. I L JZ00'					
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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: JOE CROZIER D 03/06/2009