

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004631

FILED
Apr 21, 2009
Secretary of State

Entity Name: TREASURE COAST COMMUNITY HEALTH, INC.

Current Principal Place of Business:

12196 CR 512
FELLSMERE, FL 32948 US

New Principal Place of Business:

Current Mailing Address:

12196 CR 512
FELLSMERE, FL 32948 US

New Mailing Address:

FEI Number: 59-3219191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPPEL, CRAIG M ESQ.
1515 INDIAN RIVER BLVD STE A-210
VERO BEACH, FL 32960 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: T () Delete
Name: DELP, BRYAN
Address: 7145 8TH AVE
City-St-Zip: VERO BEACH, FL 32967

Title: S () Delete
Name: WATT, SHERLEE
Address: 162 CYPRESS ST
City-St-Zip: FELLSMERE, FL 32948

Title: VD (X) Delete
Name: LEBOEUF, WAYNE
Address: 392 BANYAN STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: PD () Delete
Name: RAPPEL, ROBERT
Address: 1515 INDIAN RIVER BLVD STE210
City-St-Zip: VERO BEACH, FL 329607103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DONALD G. LOFTUS

CEO

04/21/2009

Electronic Signature of Signing Officer or Director

Date