2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005223

FILED Jaņ 13, 2<u>01</u>1 Secretary of State

Entity Name: RURAL HEALTH NETWORK OF MONROE COUNTY, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

27225 OVERSEAS HIGHWAY RAMROD KEY SUMMERLAND, FL 33042

New Mailing Address: Current Mailing Address:

PO BOX 500370

MARATHON, FL 33050 US

FEI Number: 65-0474953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, DANIEL E PH.D. 27225 OVERSEAS HIGHWAY RAMROD KEY SUMMERLAND, FL 33042 US

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:

CD

BRIDGES, JACK Name: Address: 13 PARK DRIVE

City-St-Zip: KEY LARGO, FL 33037 US

Title: VD

Name: LUSE, ROBERT H Address: 135 HARBOR LANE City-St-Zip: TAVERNIER, FL 33070 US

Title: TD

OATWAY, DAVE Name: 623 SIMONTON STREET Address: City-St-Zip: KEY WEST, FL 33040 US

Title: SD

CLEVER, DOROTHY Name: 701 SPANISH MAIN DRIVE Address: City-St-Zip: CUDJOE KEY, FL 33042 US

Title: CEO

Name: SMITH, DANIEL

237 EAST CAHILL COURT Address: BIG PINE KEY, FL 33043 US City-St-Zip:

Title:

MUNSON, ROBERT Name: Address: 21270 CONCH DRIVE CUDJOE KEY, FL 33042 US City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: DANIEL E. SMITH CEO 01/13/2011