2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005358

FILED Apr 10, 2012 Secretary of State

Entity Name: GOVERNOR'S COUNCIL FOR COMMUNITY HEALTH PARTNERSHIPS, INC.

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

800 CLEMATIS ST.

2332

WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

800 CLEMATIS ST.

2332

WEST PALM BEACH, FL 33401

FEI Number: 65-0449910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TAMARKIN, BERTRAM 44 COCOANUT ROW 510

PALM BEACH, FL 33480 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:

Title: PD

Name: PETERS, JOSEPH

Address: 5725 CORPORATE WAY, SUITE 102 City-St-Zip: WEST PALM BEACH, FL 33407

Title: VD

Name: PALIN, ROBERT

Address: 3818 COUNTY LINE ROAD, #146

City-St-Zip: TEQUESTA, FL 33469

Title: SD

Name: ROMAN, LINDA
Address: 2600 QUANTUM BLVD.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: TD

Name: TAMARKIN, BERTRAM
Address: 44 COCOANUT ROW APT 510
City-St-Zip: PALM BEACH, FL 33480

Title: [

Name: VERSE, SELMA RN, MED
Address: 5081 BURNING TREE CIRCLE

City-St-Zip: STUART, FL 34997

Title: [

 Name:
 IRION, JANE

 Address:
 5888 RIVER ISLE RD

 City-St-Zip:
 JUPITER, FL 33458

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: JOSEPH E. PETERS PD 04/10/2012