2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007041

Entity Name: TOTAL HEALTH CHOICE, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
8701 SW 137 AVE 200 MIAMI, FL 33183	1701 PONCE DE LEON BLVD. 300 CORAL GABLES, FL 331344414

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 830010 MIAMI, FL 332890010	3011 W.GRAND BOULEVARD 1600 DETROIT, MI 48202

FEI Number: 33-0603319   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:**
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:	CEO
Name:	NAROWITZ, RANDY
Address:	3011 W.GRAND BOULEVARD
City-St-Zip:	DETROIT, MI 48202

Title:	TD
Name:	KATHER, KATHLEEN
Address:	3011 W.GRAND BOULEVARD
City-St-Zip:	DETROIT, MI 48202

Title:	D
Name:	GETRUDE, MINKIEWICZ
Address:	3011 W.GRAND BOULEVARD
City-St-Zip:	DETROIT, MI 48202

Title:	CD
Name:	BAKER, DOUGLAS
Address:	3011 W.GRAND BOULEVARD
City-St-Zip:	DETROIT, MI 48202

Title:	SVCD
Name:	COLE, RUBY OCTAVIA
Address:	3011 W.GRAND BOULEVARD
City-St-Zip:	DETROIT, MI 48202

Title:	D
Name:	ABBOTT, JEANETTE
Address:	3011 W.GRAND BOULEVARD
City-St-Zip:	DETROIT, MI 48202

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: RANDY NAROWITZ   CEO   03/01/2011

           Electronic Signature of Signing Officer or Director   Date