## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N99000005231

TI FILED

Aug 03, 2005

Secretary of State

Entity Name: COMMUNITY HEALTH CENTERS ALLIANCE, INC.

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

801 94TH AVENUE NORTH SUITE 201 ST PETERSBURG, FL 33702

Current Mailing Address: New Mailing Address:

801 94TH AVENUE NORTH SUITE 201 ST PETERSBURG, FL 33702

FEI Number: 59-3631620 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:

DILLION, WILLIM P ESQ.
2590 GOLDEN GATE PARKWAY
SUITE 108
NAPLES, FL 34105 US
DILLION, WILLIM P ESQ.
117 SOUTH GADSDEN STREET
TALLAHASSEE, FL 32302 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: 08/03/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 ( ) Delete
 Title:
 P/D
 ( X) Change ( ) Addition

 Name:
 BROWN, EDDWIN W
 Name:
 GADDIS, DIANE I

 Address:
 4450 SOUTH TIFFANY DRIVE
 Address:
 801 94TH AVENUE NORTH

Address: 4450 SOUTH TIFFANY DRIVE Address: 801 94TH AVENUE NORTH

City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: ST. PETERSBURG, FL 33702

Title: VPD ( ) Delete Title: C/D (X) Change ( ) Addition Name: AKIN, RICHARD B Name: BROWN, EDWIN

Address: 1454 MADISON AVENUE Address: 4450 S. TIFFANY DRIVE
City-St-Zip: IMMOKALEE, FL 34142 City-St-Zip: WEST PALM BEACH, FL 33407

Title: STD () Delete Title: VC/D (X) Change () Addition Name: WILLIAMS, GAYE Name: AKIN, RICHARD

 Address:
 950 CR 17-A WEST
 Address:
 1454 MADISON AVENUE

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 IMMOKALEE, FL 34142

Title: D () Delete Title: ST/D (X) Change () Addition
Name: CAHILL, DENNIS Name: PRESHA, WALTER

 Name:
 CAHILL, DENNIS
 Name:
 PRESHA, WALTER

 Address:
 2400 CR 415-A
 Address:
 12214 US HWY 30

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:
 PALMETTO, FL 34221

Title: D () Delete Title: D (X) Change () Addition

 Name:
 YATES, DEWAYNE
 Name:
 CAHILL, DENNIS

 Address:
 919 S MAIN STREET
 Address:
 2400 CR 415A

 City-St-Zip:
 TRENTON, FL 32693
 City-St-Zip:
 SANFORD, FL 32771

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 MYLES, TERRY
 Name:
 GAYE, WILLIAMS

 Address:
 441 NORTH ALBRITTON ROAD
 Address:
 950 CR 17A

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:
 AVON PARK, FL 33825

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANE GADDIS P/D 08/03/2005