

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047769

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Entity Name:** RICHARDSON HEALTHCARE GROUP, INC.

**Current Principal Place of Business:**

163 WOODCREEK DR N  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

163 WOODCREEK DR N  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

FEI Number: 20-0013464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELIZABETH G. BOURLON, CPA, PA  
262 4TH AVENUE N  
ST PETERSBURG, FL 33701 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: P  
Name: RICHARDSON, SUSAN M  
Address: 163 WOODCREEK DR N  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S  
Name: RICHARDSON, FRED A  
Address: 163 WOODCREEK DR N  
City-St-Zip: SAFETY HARBOR, FL 34695

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN M RICHARDSON

P

04/23/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date