

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000114932

Entity Name: SUMMIT HEALTH CENTER, INC.

FILED
Apr 26, 2011
Secretary of State

Current Principal Place of Business:

2809 NORTH POWERS DRIVE, SUITE D
ORLANDO, FL 32818

New Principal Place of Business:

3760 N. JOHN YOUNG PKWY
SUITE 103
ORLANDO, FL 32804

Current Mailing Address:

963 MALDEN CT.
LONGWOOD, FL 32750

New Mailing Address:

4044 W. LAKE MARY BLVD
UNIT # 104-104
LAKE MARY, FL 32746

FEI Number: 20-0316486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUEVAS, BELINDA
963 MALDEN CT
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

CUEVAS, BELINDA
4044 W. LAKE MARY BLVD
UNIT # 104-104
LAKE MARY, FL 32746 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: BELINDA CUEVAS

04/26/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD
Name: CUEVAS, BELINDA
Address: 4044 W. LAKE MARY BLVD, UNIT# 104-104
City-St-Zip: LAKE MARY, FL 32746

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: BELINDA CUEVAS

PSTD

04/26/2011

Electronic Signature of Signing Officer or Director

Date