2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 10, 2005
Secretary of State

DOCUMENT# P04000068886

Entity Name: COUNTY HEALTH CHOICE, INC.

Current Principal Place of Business:

6195 ROCK ISLAND RD, # 516
TAMARAC, FL 33319

New Principal Place of Business:

1801 S. PERIMETER ROAD
SUITE 150
FT LAUDERDALE, FL 33309

Current Mailing Address:

6195 ROCK ISLAND RD, # 516
TAMARAC, FL 33319

New Mailing Address:

1801 S. PERIMETER ROAD
SUITE 150
FT LAUDERDALE, FL 33309

FEI Number: 65-0842427 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REID AND ASSOCIATES
633 NE 167TH ST
STE 318
MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

EDWARDS, GILBERT
1801 S. PERIMETER ROAD
SUITE 150
FT LAUDERDALE, FL 33309 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: GILBERT EDWARDS 08/10/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete
Name: EDWARDS, GILBERT
Address: 6195 ROCK ISLAND RD, # 516
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change ( ) Addition
Name: EDWARDS, GILBERT
Address: 1801 S. PERIMETER ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

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

SIGNATURE: GILBERT EDWARDS PCEO 08/10/2005
Electronic Signature of Signing Officer or Director Date