

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000105112

FILED
Apr 29, 2011
Secretary of State

Entity Name: QUALITY CARE SUPPORT SERVICES 51, INC.

Current Principal Place of Business:

2121 CORPORATE SQUARE BLVD SUITE 120
JACKSONVILLE, FL 32216

New Principal Place of Business:

2404 CESERY BLVD
JACKSONVILLE, FL 32211

Current Mailing Address:

2121 CORPORATE SQUARE BLVD SUITE 120
JACKSONVILLE, FL 32216

New Mailing Address:

2404 CESERY BLVD
JACKSONVILLE, FL 32211

FEI Number: 86-1112767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONALD, DIXON W
2121 CORPORATE SQUARE BLVD SUITE 120
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

RONALD, DIXON W
2404 CESERY BLVD
JACKSONVILLE, FL 32211 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: RONALD W DIXON

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CLARK, GAIL M
Address: 2404 CESERY BLVD
City-St-Zip: JACKSONVILLE, FL 32211

Title: V
Name: DIXON, RONALD W
Address: 2404 CESERY BLVD
City-St-Zip: JACKSONVILLE, FL 32211

Title: S
Name: DIXON, RONALD W
Address: 2404 CESERY BLVD
City-St-Zip: JACKSONVILLE, FL 32211

Title: T
Name: DIXON, RONALD W
Address: 2404 CESERY BLVD
City-St-Zip: JACKSONVILLE, FL 32211

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: RONALD W DIXON

P

04/29/2011

Electronic Signature of Signing Officer or Director

Date