

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151346

FILED
Feb 16, 2011
Secretary of State

Entity Name: PREFERRED HEALTH RESOURCES, INC.

Current Principal Place of Business:

22 LINKS AVENUE
SUITE 204
SARASOTA, FL 34236

New Principal Place of Business:

583 INTERSTATE BLVD
SARASOTA, FL 34240

Current Mailing Address:

22 LINKS AVENUE
SUITE 204
SARASOTA, FL 34236

New Mailing Address:

583 INTERSTATE BLVD.
SARASOTA, FL 34240

FEI Number: 20-1847440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHEELER, RONALD E M.D.
22 LINKS AVENUE
SUITE 204
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

WHEELER, RONALD E M.D.
583 INTERSTATE BLVD.
SARASOTA, FL 34240 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 E. WHEELER, M.D.

02/16/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: WHEELER, RONALD E M.D.
Address: 583 INTERSTATE BLVD.
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: WHEELER, SHELLEY
Address: 583 INTERSTATE BLVD.
City-St-Zip: SARASOTA, FL 34240

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: SHELLEY WHEELER

D

02/16/2011

Electronic Signature of Signing Officer or Director

Date