

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000009218

FILED
Mar 09, 2011
Secretary of State

Entity Name: REED HEALTHCARE SERVICES, INC.

Current Principal Place of Business:

4238 BOBCAT COVE
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

4238 BOBCAT COVE
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 20-4130475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COWEN, EDDIE
912 S PALM BLVD
E
NICEVILLE, FL 32578 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: CEO
Name: REED, DONNA G
Address: 4238 BOBCAT COVE
City-St-Zip: NICEVILLE, FL 32578 US

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: DONNA REED

CEO

03/09/2011

Electronic Signature of Signing Officer or Director

Date