

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000119089

FILED
May 01, 2011
Secretary of State

Entity Name: SANDEL'S PRIMARY HEALTH CARE CENTER, INC.

Current Principal Place of Business:

7750 PALM RIVER ROAD
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

7750 PALM RIVER ROAD
TAMPA, FL 33619 US

New Mailing Address:

FEI Number: 59-3543788 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FRENCH-ROSE, SANDRA E CEO
7750 PALM RIVER ROAD
TAMPA, FL 33619 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: V
Name: ROSE, GERMAINE
Address: 4235 BALINGTON DRIVE
City-St-Zip: VALRICO, FL 33596 US

Title: TPD
Name: FRENCH-ROSE, SANDRA
Address: 7750 PALM RIVER ROAD
City-St-Zip: TAMPA, FL 33619 US

Title: S
Name: ROSE, ANTOWAN
Address: 4235 BALINGTON DRIVE
City-St-Zip: VALRICO, FL 33596 US

Title: AS
Name: ROSE, ALETHIA A
Address: 4235 BALINGTON DRIVE
City-St-Zip: VALRICO, FL 33596 US

Title: MD
Name: HANNUM, ROBERT J DR
Address: 7750 PALM RIVER ROAD
City-St-Zip: TAMPA, FL 33619

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: SANDRA E. FFRENCH-ROSE

CEO

05/01/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date