

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000006332

FILED
Apr 28, 2011
Secretary of State

Entity Name: GULF COAST HEALTH INSTITUTE, INC.

Current Principal Place of Business:

5778 5TH AVENUE NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

5778 5TH AVENUE NORTH
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 26-1771622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHRIEFER, GEORGE J ESQUIRE
6075 PARK BOULEVARD
SUITE A
PINELLAS PARK, FL 33781 US

Name and Address of New Registered Agent:

ALLEN, NILA J
5778 5TH AVE NORTH
ST PETERSBURG, FL 33710 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: NILA ALLEN

04/28/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ALLEN, NILA
Address: 5778 5TH AVNEUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

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: NILA ALLEN

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date