2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000040068

Entity Name: VCH MANAGEMENT, INC.

FILED Feb 16, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3013 NW COUNTY ROAD 661-A 5389 NW LILY AVENUE ARCADIA, FL 34266 ARCADIA, FL 34266

Current Mailing Address: New Mailing Address:

3013 NW COUNTY ROAD 661-A 5389 NW LILY AVENUE ARCADIA, FL 34266 ARCADIA, FL 34266

FEI Number: 27-0173387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOWMAN, WILLIAM R JR. 1000 LEGION PLACE **SUITE 1700** ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

HOLLINGSWORTH, VERNON C III Name:

5389 NW LILY AVENUE Address: City-St-Zip: ARCADIA, FL 34266

Title:

Name: HOLLINGSWORTH, VERNON C III

Address: 5389 NW LILY AVENUE ARCADIA, FL 34266 City-St-Zip:

Title:

HOOPINGARNER, LOU Name: 5389 NW LILY AVENUE Address: City-St-Zip: ARCADIA, FL 34266

Title: SEC

MILLS, NANCY L Name: Address: 5389 NW LILY AVENUE City-St-Zip:

ARCADIA, FL 34266

Title:

THORNTON, MYRA B Name: Address: 5389 NW LILY AVENUE City-St-Zip: ARCADIA, FL 34266

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: MARY LOU HOOPINGARNER Т 02/16/2012