

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000092682

FILED
Apr 12, 2011
Secretary of State

Entity Name: TRINITY HEALTH CARE MEDICAL CENTER, P.A.

Current Principal Place of Business:

2437 SE FORT KING STREET
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

2437 SE FORT KING STREET
OCALA, FL 34471

New Mailing Address:

FEI Number: 27-0906207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, DAVID A JR.
1243 SOUTHEAST 22ND AVENUE
OCALA, FL 34471 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: P, D
Name: KUHN, DAVID B M.D.
Address: 2761 SE 14TH STREET
City-St-Zip: OCALA, FL 34471

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: DAVID B. KUHN

PRES

04/12/2011

Electronic Signature of Signing Officer or Director

Date