

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000005908

Entity Name: CHOOSE HEALTH, INC.

FILED
Jan 20, 2011
Secretary of State

Current Principal Place of Business:

6105 MONTELENA CIRCLE
UNIT # 6102
NAPLES, FL 34119 US

New Principal Place of Business:

315 CYPRESS WAY W.
NAPLES, FL 34110 US

Current Mailing Address:

6105 MONTELENA CIRCLE
UNIT # 6102
NAPLES, FL 34119 US

New Mailing Address:

315 CYPRESS WAY W.
NAPLES, FL 34110 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMONS, BARRY L ESQ.
9100 S. DADELAND BLVD
SUITE 400
MIAMI, FL 33156 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
Name: FEINSTEIN, BRIAN
Address: 315 CYPRESS WAY W.
City-St-Zip: NAPLES, FL 34110 US

Title: VPST
Name: MORGAN, AMY
Address: 315 CYPRESS WAY W.
City-St-Zip: NAPLES, FL 34110 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: BRIAN FEINSTEIN

PRES

01/20/2011

Electronic Signature of Signing Officer or Director

Date