## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000008654

Entity Name: NORTHSTAR HEALTH CORP.

FILED Apr 19, 2011 Secretary of State

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

10721 NORTHWEST 48TH STREET 701 W CYPRESS CREEK RD CORAL SPRINGS, FL 33076

200

FORT LAUDERDALE, FL 33309

**Current Mailing Address: New Mailing Address:** 

10721 NORTHWEST 48TH STREET 701 W CYPRESS CREEK RD CORAL SPRINGS, FL 33076 200

FORT LAUDERDALE, FL 33309

FEI Number: 27-1793139 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:

SPIEGEL & UTRERA, P.A. SHADER, MARK A DR 1840 SW 22ND ST. 701 W CYPRESS CREEK RD 4TH FLOOR 200

MIAMI, FL 33145 US FORT LAUDERDALE, FL 33309 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: MARK A SHADER 04/19/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PSD

SHADER, MARK A DR. Name:

701 W CYPRESS CREEK RD SUITE 200 Address: City-St-Zip: FORT LAUDERDALE, FL 33309

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: MARK A SHADER **PSD** 04/19/2011