

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000028412

FILED
Mar 21, 2011
Secretary of State

Entity Name: SANFORD HEALTHCARE SOLUTIONS, INC.

Current Principal Place of Business:

4613 HWY 17
FLEMING ISLAND, FL 32003

New Principal Place of Business:

2121 POND SPRING WAY
FLEMING ISLAND, FL 32003

Current Mailing Address:

4613 HWY 17
FLEMING ISLAND, FL 32003

New Mailing Address:

2121 POND SPRING WAY
FLEMING ISLAND, FL 32003

FEI Number: 27-2361357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANFORD, HOLLY K
4613 HWY 17
FLEMING ISLAND, FL 32003 US

Name and Address of New Registered Agent:

SANFORD, HOLLY K
2121 POND SPRING WAY
FLEMING ISLAND, FL 32003 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

03/21/2011

Date

OFFICERS AND DIRECTORS:

Title: O
Name: SANFORD, HOLLY K
Address: 2121 POND SPRING WAY
City-St-Zip: FLEMING ISLAND, FL 32003

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: HOLLY SANFORD

CEO

03/21/2011

Electronic Signature of Signing Officer or Director

Date