

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000036134

FILED
Jan 25, 2012
Secretary of State

Entity Name: MID FLORIDA HEALTHCARE MANAGEMENT, INC.

Current Principal Place of Business:

4900 SW 46TH COURT #2509
OCALA, FL 34474

New Principal Place of Business:

676 SE 47TH LOOP
OCALA, FL 34474

Current Mailing Address:

4900 SW 46TH COURT #2509
OCALA, FL 34474

New Mailing Address:

676 SE 47TH LOOP
OCALA, FL 34474

FEI Number: 27-2573298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILLMAN, JERRY E
4900 SW 46TH CT
OCALA, FL 34474 US

Name and Address of New Registered Agent:

GILLMAN, JERRY E
676 SE 47TH LOOP
OCALA, FL 34474 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: JERRY E GILLMAN

01/25/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: GILLMAN, JERRY E
Address: 676SE 47TH LOOP
City-St-Zip: Ocala, FL 34474

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: JERRY E GILLMAN

CEO

01/25/2012

Electronic Signature of Signing Officer or Director

Date