2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000072871

Entity Name: MARION RURAL HEALTH, INC.

FILED Jan 19, 2011 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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15932 E HWY 40

SILVER SPRINGS, FL 34488 US

Current Mailing Address: New Mailing Address:

15932 E HWY 40

SILVER SPRINGS, FL 34488 US

FEI Number: 59-3273752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHERRY, TERESA A 120 N.E. 50TH AVENUE OCALA, FL 34470 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 Date

OFFICERS AND DIRECTORS:

Title: PD

Name: CHERRY, TERESA A Address: 120 N.E. 50TH AVENUE City-St-Zip: OCALA, FL 34470

Title: TRE

Name: SAN FILIPPO, ELIZABETH C

Address: 120 NE 50TH AVE City-St-Zip: OCALA, FL 34470

Title: SEC

 Name:
 CHERRY, RICHARD E IV

 Address:
 120 NE 50TH AVE

 City-St-Zip:
 OCALA, FL 34470

Title: VPD

 Name:
 SPOGEN, FREDERICK C III

 Address:
 120 NE 50TH AVENUE

 City-St-Zip:
 OCALA, FL 34470

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: TERESA A CHERRY PD 01/19/2011