

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078311

FILED
Jun 04, 2011
Secretary of State

Entity Name: HEALTH ADMINISTRATIVE SERVICES, INC.

Current Principal Place of Business:

4908 TURTLE CREEK TRAIL
OLDSMAR, FL 34677 US

New Principal Place of Business:

Current Mailing Address:

4908 TURTLE CREEK TRAIL
OLDSMAR, FL 34677 US

New Mailing Address:

FEI Number: 59-3342038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COATES, BOBBY L
4908 TURTLECREEK TRAIL
OLDSMAR, FL 34677 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: PRES
Name: COATES, BOBBY L
Address: P.O. BOX 2127
City-St-Zip: OLDSMAR, FL 34677

Title: VP
Name: TEMPLE, ELIZABETH S
Address: PO BOX 2127
City-St-Zip: OLDSMAR, FL 34677

Title: VP
Name: COATES, DEBORAH R
Address: PO BOX 2127
City-St-Zip: OLDSMAR, FL 34677

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: DEBORAH R COATES

VP

06/04/2011

Electronic Signature of Signing Officer or Director

Date