

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000005313

Entity Name: DONNA M. HEALY, INC.

**FILED**  
**Jan 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1310 SE 13TH AVENUE  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

1310 SE 13TH AVENUE  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 59-3424230

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HEALY, DONNA M  
1310 SE 13TH AVENUE  
OCALA, FL 34471 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: D  
Name: HEALY, DONNA M  
Address: 1310 SE 13TH AVENUE  
City-St-Zip: OCALA, FL 34471

Title: D  
Name: FR. JOHN CELLA, O.F.M., PHD., ESQ.  
Address: 1310 SE 13TH AVENUE  
City-St-Zip: OCALA, FL 34471

Title: D  
Name: STRICKLAND, RAYMOND N JR  
Address: 1724 SE 17TH AVENUE  
City-St-Zip: OCALA, FL 34471

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: DONNA M HEALY

D

01/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date