

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000099748

FILED
Jan 10, 2012
Secretary of State

Entity Name: DELTA HEALTH SYSTEMS, INC.

Current Principal Place of Business:

4360 NORTHLAKE BLVD
#201
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

8236 LAKEVIEW DRIVE
WEST PALM BEACH, FL 33402

Current Mailing Address:

4360 NORTHLAKE BLVD
#201
PALM BEACH GARDENS, FL 33410

New Mailing Address:

8236 LAKEVIEW DRIVE
WEST PALM BEACH, FL 33402

FEI Number: 65-0798586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TALERICO, MICHAEL D
4360 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410 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: EVP
Name: YOUNG, HAL
Address: 12288 ARBOR DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PRES
Name: TALERICO, MICHAEL D
Address: 8236 LAKEVIEW DR
City-St-Zip: WEST PALM BEACH, FL 33412

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: MICHAEL TALERICO

PRES

01/10/2012

Electronic Signature of Signing Officer or Director

Date