

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094978

FILED
Feb 13, 2012
Secretary of State

Entity Name: PROCARE HEALTHPLANS, INC.

Current Principal Place of Business:

6100 GLADES ROAD, SUITE 205
BOCA RATON, FL 33434

New Principal Place of Business:

6100 GLADES ROAD
205
BOCA RATON, FL 33434

Current Mailing Address:

6100 GLADES ROAD, SUITE 205
BOCA RATON, FL 33434

New Mailing Address:

6100 GLADES ROAD
205
BOCA RATON, FL 33434

FEI Number: 65-0876109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, HARLAN I
2499 GLADES ROAD #105
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

COHEN, HARLAN I
6100 GLADES ROAD #205
BOCA RATON, FL 33434 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:

02/13/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: COHEN, HARLAN I
Address: 6100 GLADES RD #205
City-St-Zip: BOCA RATON, FL 33434

Title: VP
Name: COHEN, KATTY W
Address: 6100 GLADES RD #205
City-St-Zip: BOCA RATON, FL 33434

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: HARLAN I COHEN

PRES

02/13/2012

Electronic Signature of Signing Officer or Director

Date