

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S74577

FILED
Jan 11, 2012
Secretary of State

Entity Name: NATIONAL HEALTHCARE ASSOCIATES, INC.

Current Principal Place of Business:

999 PONCE DE LEON BOULEVARD
SUITE 950
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

999 PONCE DE LEON BOULEVARD
SUITE 950
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0282999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENBERG, PATRICIA
999 PONCE DE LEON BOULEVARD
SUITE 950
CORAL GABLES, FL 33134 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: PST
Name: GREENBERG, PATRICIA E.
Address: 999 PONCE DE LEON BLVD, SUITE 950
City-St-Zip: CORAL GABLES, FL 33134

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: PATRICIA GREENBERG

PST

01/11/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date