2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2015
Secretary of State
CC3142103113

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Entity Name: ART WITH A HEART IN HEALTHCARE, INC.

Current Principal Place of Business:

841 PRUDENTIAL DRIVE
SUITE 150
JACKSONVILLE, FL 32207

Current Mailing Address:

841 PRUDENTIAL DRIVE
SUITE 150
JACKSONVILLE, FL 32207 US

FEI Number: 26-1313805

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CURLEY, CHARLES RESQ.
1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VP
Name	GUADAGNO, LORI
Address	407 16TH AVE. NORTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	BOD
Name	MEIDE, CINDY
Address	10475 FORTUNE PARKWAY SUITE 210
City-State-Zip:	JACKSONVILLE FL 32256

Title	BOD
Name	GUTHRIE, JENNIFER
Address	1870 CHALLEN AVE
City-State-Zip:	JACKSONVILLE FL 32205

Title	COB
Name	ROLAND, MELISSA
Address	515 RUTILE DRIVE
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	BOD
Name	CANNON, BROOKS
Address	3 PALMWOOD COURT
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	BOD
Name	LAIRD
Address	830-13 A1A NORTH, #127
City-State-Zip:	PONTE VEDRA BEACH FL 32082

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LORI GUADAGNO VP 02/10/2015

Electronic Signature of Signing Officer/Director Detail — Date