2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000007182

Entity Name: DISTRICT CLINIC HOLDINGS, INC.

Current Principal Place of Business:

2601 10TH AVE. NORTH SUITE 100 PALM SPRINGS, FL 33461

Current Mailing Address:

2601 10TH AVENUE NORTH SUITE 100 PALM SPRINGS, FL 33461

FEI Number: 45-5591655

Name and Address of Current Registered Agent:

SHAHRIARI, VALERIE 2601 10TH AVENUE NORTH SUITE 100 PALM SPRINGS, FL 33461 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	: VALERIE SHAHRIARI	VALERIE SHAHRIARI			
	Electronic Signature of Registered Agent				
Officer/Dired	ctor Detail :				
Title	TREASURER	Title	CHAIRMAN		
Name	BROWN, BESSIE	Name	MILLS KENDLE, JR., DAVID K		
Address	2601 10TH AVE. NORTH SUITE 100	Address	2601 10TH AVE. NORTH SUITE 100		
City-State-Zip:	PALM SPRINGS FL 33461	City-State-Zip:	PALM SPRINGS FL 33461		
Title	VC	Title	DIRECTOR		
Name	NAVARRO, FRANCES	Name	GRAY, ANGELETA		
Address	2601 10TH AVE. NORTH SUITE 100	Address	2601 10TH AVE. NORTH SUITE 100		
City-State-Zip:	PALM SPRINGS FL 33461	City-State-Zip:	PALM SPRINGS FL 33461		
Title	DIRECTOR	Title	DIRECTOR		
Name	ELDER, JAMES	Name	FIGUEROA, IRENE		
Address	2601 10TH AVE. NORTH SUITE 100	Address	2601 10TH AVE. NORTH SUITE 100		
City-State-Zip:	PALM SPRINGS FL 33461	City-State-Zip:	PALM SPRINGS FL 33461		
Title	SECRETARY	Title	DIRECTOR		
Name	CASEY, WANDA D	Name	MULLEN, JOHN C		
Address	2601 10TH AVE. NORTH SUITE 100	Address	2601 10TH AVE. NORTH SUITE 100		
City-State-Zip:	PALM SPRINGS FL 33461	City-State-Zip:	PALM SPRINGS FL 33461		

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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: DARCY DAVIS	CEO	01/09/2017

Electronic Signature of Signing Officer/Director Detail

FILED Jan 09, 2017 Secretary of State CC5208100504

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

DAVIS, DARCY J

SUITE 100 City-State-Zip: PALM SPRINGS FL 33461

2601 10TH AVE. NORTH

Name

Address

Title	DIRECTOR	Title	DIRECTOR
Name	MARTINEZ, MARA	Name	ODERO, DENNIS C
Address	2601 10TH AVE. NORTH SUITE 100	Address	2601 10TH AVE. NORTH SUITE 100
City-State-Zip:	PALM SPRINGS FL 33461	City-State-Zip:	PALM SPRINGS FL 33461
Title	CEO		