

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000011808

**Entity Name:** COMMUNITY HEART PAYEE SERVICES INC

**Current Principal Place of Business:**

6211 N. HUDSON ST  
ORLANDO, FL 32808

**Current Mailing Address:**

6211 N. HUDSON ST  
ORLANDO, FL 32808 US

**FEI Number: 85-1501529**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

COMMUNITY HEART PAYEE SERVICE  
6211 N. HUDSON ST  
ORLANDO, FL 32808 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: DEMETRIUS L. BONEY SR**

**05/01/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name BONEY, DEMETRIUS L SR.  
Address 4701 WYRESDALE ST.  
City-State-Zip: ORLANDO FL 32808

Title VP  
Name HILLMAN, EBONY N  
Address 6150 MEDFORD DR.  
City-State-Zip: ORLANDO FL 32808

Title S  
Name JACKSON, TRACEY  
Address 1912 HINCKLEY RD  
City-State-Zip: ORLANDO FL 32818

*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: DEMETRIUS L BONEY**

**PRESENT**

**05/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date