#### 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. 03/25/2013 **PRESIDENT & CEO**

SIGNATURE: KEVIN S. KEARNS

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N9400003230

Entity Name: HEALTH CHOICE NETWORK OF FLORIDA, INC.

#### **Current Principal Place of Business:**

9064 N.W. 13 TERRACE DORAL, FL 33172

## **Current Mailing Address:**

9064 N.W. 13 TERRACE DORAL. FL 33172

## FEI Number: 65-0504316

# Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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	E MICHELLE FUNDORA			03/25/2013
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	С	Title	DTC	
Name	HARTLEY, COL. BRODES JR	Name	DAVIS, CALEB	
Address	10300 SW 216TH ST	Address	3090 SW 37TH AVE	
City-State-Zip:	MIAMI FL 33190	City-State-Zip:	MIAMI FL 33133	
Title	DCEO	Title	DVC	
Name	KEARNS, KEVIN SCEO	Name	FRAZIER, ROSALYN	
Address	9064 N.W. 13 TERRACE	Address	2518 N. STATE ROAD 7	
City-State-Zip:	DORAL FL 33172	City-State-Zip:	HOLLYWOOD FL 33021	
Title	TS	Title	SECRETARY	
Name	BURNS, BAKARI	Name	BOTTOMS, CHARLES	
Address	232 NORTH ORANGE BLOSSOM TRAIL	Address City-State-Zip:	1502 EAST FOWLER TAMPA FL 33612	
City-State-Zip:	ORLANDO FL 32805	- ,		

Certificate of Status Desired: No

FILED Mar 25, 2013 Secretary of State CC4614374313

Date