

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 564944

Entity Name: ADCAHB MEDICAL COVERAGES, INC.

Current Principal Place of Business:

7351 WILES ROAD #106
CORAL SPRINGS, FL 33067

Current Mailing Address:

3000 NW 101 LANE
CORAL SPRINGS, FL 33065

FEI Number: 59-1787780

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONLEY, ROBERT
7351 WILES ROAD #106
CORAL SPRINGS, FL 33067 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: ROBERT CONLEY

04/30/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CLATSOFF, BILL
Address 3000 NW 101 LANE
City-State-Zip: CORAL SPRINGS FL 33065

Title VP
Name CLATSOFF, WILLIAM
Address 7351 WILES ROAD #106
City-State-Zip: CORAL SPRINGS FL 33067

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: WILLIAM CLATSOFF

VP

04/30/2017

Electronic Signature of Signing Officer/Director Detail

Date