

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000002358

**Entity Name:** HEALTH CARE MANAGERS, INC.

**Current Principal Place of Business:**

2380 SADLER ROAD  
SUITE 201  
FERNANDINA BEACH, FL 32034

**Current Mailing Address:**

P.O. BOX 15369  
FERNANDINA BEACH, FL 32035 US

**FEI Number:** 47-0853468

**Certificate of Status Desired:** No

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

MEAD, ROBERT D  
2380 SADLER ROAD  
SUITE 201  
FERNANDINA BEACH, FL 32034 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 D MEAD, D

03/10/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name SELL, STEVEN W  
Address 2380 SADLER ROAD, SUITE 201  
City-State-Zip: FERNANDINA BEACH FL 32034

Title D  
Name MEAD, BETSY  
Address 2380 SADLER ROAD  
STE 201  
City-State-Zip: FERNANDINA BEACH FL 32034

Title D  
Name MEAD, ROBERT D  
Address 2380 SADLER ROAD  
SUITE 201  
City-State-Zip: FERNANDINA BEACH FL 32034

*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:** ROBERT MEAD

D

03/10/2020

Electronic Signature of Signing Officer/Director Detail

Date