

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000047333

Entity Name: EAST COAST HEALTH INSURANCE, INC.

Current Principal Place of Business:

426 W. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

Current Mailing Address:

426 W. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441 US

FEI Number: 20-8846939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EHRENTHAL, CAROLINE
426 W. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PTD
Name EHRENTHAL, CAROLINE
Address 426 W. HILLSBORO BLVD.
City-State-Zip: DEERFIELD BEACH FL 33441

Title CFO
Name SAWICKI, JOSHUA
Address 426 W. HILLSOBRO BLVD.
City-State-Zip: DEERFIELD BEACH FL 33441

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: JOSHUA SAWICKI

MGR

01/12/2017

Electronic Signature of Signing Officer/Director Detail

Date