

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000037530

Entity Name: NORTH CENTRAL FLORIDA HEALTH SERVICES CO.

Current Principal Place of Business:

3807 NE 4 STREET
OCALA, FL 34470

Current Mailing Address:

P. O. BOX 2664
OCALA, FL 34478-2664 US

FEI Number: 30-0682071

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GHANNAM, NATALYA
3807 NE 4 STREET
OCALA, FL 34470 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: NATALYA GHANNAM

02/07/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP, DIRECTOR, SECRETARY
Name	GHANNAM, NATALYA	Name	GHANNAM, JOHN HANNA
Address	P. O. BOX 2664	Address	P. O. BOX 2664
City-State-Zip:	OCALA FL 34478-2664	City-State-Zip:	OCALA FL 34478-2664

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: NATALYA GHANNAM

PRESIDENT

02/07/2021

Electronic Signature of Signing Officer/Director Detail

Date