

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000037530

Entity Name: NORTH CENTRAL FLORIDA HEALTH SERVICES CO.

Current Principal Place of Business:

5761 SW 63 LANE RD
OCALA, FL 34474

Current Mailing Address:

5761 SW 63 LANE RD
OCALA, FL 34474

FEI Number: 30-0682071

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOROTAYEVA, NATALYA
5761 SW 63 LANE RD
OCALA, FL 34474 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 P
Name KOROTAYEVA, NATALYA
Address 5761 SW 63 LANE RD
City-State-Zip: Ocala FL 34474

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 KOROTAYEVA

P

04/14/2016

Electronic Signature of Signing Officer/Director Detail

Date