2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2015
Secretary of State
CC6778027443

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Entity Name: SUNCARE HEALTH, INC.

Current Principal Place of Business:

30 REMINGTON ROAD
OAKLAND, FL 34787

Current Mailing Address:

30 REMINGTON ROAD
OAKLAND, FL 34787

FEI Number: 47-1347078

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, DEBRA
FLORIDA CHIROPRACTIC ASSOCIATION, INC.
30 REMINGTON ROAD
OAKLAND, FL 34787 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	D	Title	D
Name	JOHNSON, JOE W	Name	HOFFMAN, DEBRA
Address	PO BOX 486	Address	11802 N. 56TH ST
City-State-Zip:	PAXTON FL 32538-0486	City-State-Zip:	TAMPA FL 33617
Title	D	Title	D
Name	DODD, APRIL	Name	GORDON, JEREMY
Address	2025 PARK ST	Address	905 N. STONE ST
City-State-Zip:	JACKSONVILLE FL 32204	City-State-Zip:	DELAND FL 32720
Title	D		
Name	LEVINE, ARTHUR		
Address	5880 SW 7TH STREET		
City-State-Zip:	PLANTATION FL 33317		

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: JOE JOHNSON D 02/24/2015

Electronic Signature of Signing Officer/Director Detail — Date