

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069107

Entity Name: HEALTHCARE RESOURCES OF JACKSONVILLE, INC.

Current Principal Place of Business:

4612 SAN JUAN AVENUE
JACKSONVILLE, FL 32210

Current Mailing Address:

4612 SAN JUAN AVENUE
JACKSONVILLE, FL 32210 US

FEI Number: 59-3459478

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSLEY, MICHAEL CPRES
4612 SAN JUAN AVENUE
JACKSONVILLE, FL 32210 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 PRES
Name MOSLEY, MICHAEL C
Address 4427 SHAWNEE STREET
City-State-Zip: JACKSONVILLE FL 32210

Title VP
Name MOSLEY, CHARLES JR
Address 2920 IROQUOIS AVENUE
City-State-Zip: JACKSONVILLE FL 32210

Title SEC
Name MOSLEY, CAMERON M
Address 4427 SHAWNEE ST
City-State-Zip: JACKSONVILLE FL 32210

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: MICHAEL C. MOSLEY

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date