

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000064624

Entity Name: SUN CAPITAL HEALTHCARE, INC.**Current Principal Place of Business:**999 YAMATO ROAD
THIRD FLOOR
BOCA RATON, FL 33431**Current Mailing Address:**999 YAMATO ROAD
THIRD FLOOR
BOCA RATON, FL 33431**FEI Number:** 65-0941604**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARMSTRONG, DAVID J
999 YAMATO ROAD
THIRD FLOOR
BOCA RATON, FL 33431 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:** DAVID J. ARMSTRONG

05/01/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, CEO
Name BARONOFF, PETER
Address 999 YAMATO ROAD, THIRD FLOOR
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name NEWMAN, DANIEL
Address 999 YAMATO ROAD
THIRD FLOOR
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name REUBEN, KEITH
Address 999 YAMATO ROAD
THIRD FLOOR
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT
Name GOLD, RICHARD
Address 999 YAMATO ROAD
THIRD FLOOR
City-State-Zip: BOCA RATON FL 33431

Title VP, CFO, TREASURER
Name HOPWOOD, JAMES
Address 999 YAMATO ROAD
THIRD FLOOR
City-State-Zip: BOCA RATON FL 33431

Title VP, SECRETARY
Name ARMSTRONG, DAVID J
Address 999 YAMATO ROAD
THIRD FLOOR
City-State-Zip: BOCA RATON FL 33431

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: DAVID J. ARMSTRONG

VICE PRESIDENT

05/01/2014

Electronic Signature of Signing Officer/Director Detail

Date