2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V60573

Entity Name: VITALCARE HEALTH SERVICES, INC.

Current Principal Place of Business:

2600 TECHNOLOGY DRIVE SUITE 300 ORLANDO, FL 32804

Current Mailing Address:

2600 TECHNOLOGY DRIVE SUITE 300

ORLANDO, FL 32804 US

FEI Number: 59-3143938 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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

FILED May 01, 2014

Secretary of State

CC0650854020

Officer/Director Detail:

PRESIDENT, DIRECTOR Title Title SECRETARY, DIRECTOR

PIGG. TIMOTHY C Name Name LEE, R. KIMBARK

Address 2600 TECHNOLOGY DRIVE, SUITE 300 Address 2600 TECHNOLOGY DRIVE, SUITE 300

City-State-Zip: ORLANDO FL 32804 City-State-Zip: ORLANDO FL 32804

Title **TREASURER**

MEADOR, DAVID J Name

2600 TECHNOLOGY DRIVE, SUITE 300 Address

City-State-Zip: ORLANDO FL 32804

SIGNATURE: R. KIMBARK LEE

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.

Electronic Signature of Signing Officer/Director Detail

SECRETARY

05/01/2014

Date