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 617, Florida Statutes; and that my name appears	
above, or on an attachment with all other like empowered.	

SIGNATURE: KEVIN BOYER

Electronic Signature of Signing Officer/Director Detail

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:

	DPS	Title	VP
ie	BOYER, KEVIN L	Name	ANDERSON
ress	2410 57TH STREET EAST	Address	20 HIGHLAN
State-Zip:	BRADENTON FL 34208	City-State-Zip:	OXFORD G
	DT		

0

Name

L

Address

	Electronic Signature of Registered Agent					
Officer/Director Detail :						
Title	DPS	Title	VP			
Name	BOYER, KEVIN L	Name	ANDERSON, TERRENCE			
Address	2410 57TH STREET EAST	Address	20 HIGHLAND RIDGE LAI			
City-State-Zip:	BRADENTON FL 34208	City-State-Zip:	OXFORD GA 30054			
Title	DT					

Name and Address of Current Registered Agent:

2410 57TH STREET EAST BRADENTON, FL 34208

BRADENTON, FL 34208

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0300004637

Entity Name: KEVIN L. BOYER, M.D. CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

2410 57TH STREET EAST

Current Mailing Address:

FEI Number: 03-0520299

BOYER, JEFFREY S 22780 LINCOLN ROAD

City-State-Zip: LINCOLN NE 68028

BOYER, KEVIN L 2410 57TH STREET EAST BRADENTON, FL 34208 US

FILED Jan 27, 2016 Secretary of State CC0592887090

Certificate of Status Desired: No

ΈE ٩NE

PRESIDENT

01/27/2016

Date

Date