

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000512

FILED  
Apr 29, 2010  
Secretary of State

Entity Name: CARESTREAM HEALTH, INC.

**Current Principal Place of Business:**

150 VERONA ST  
ROCHESTER, NY 14608

**New Principal Place of Business:**

**Current Mailing Address:**

150 VERONA ST  
ROCHESTER, NY 14608

**New Mailing Address:**

FEI Number: 20-8190334      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301      US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:            PRES  
Name:            HOBERT, KEVIN J  
Address:        150 VERONA ST  
City-St-Zip:    ROCHESTER, NY 14608

Title:            S  
Name:            QUINN, JAMES M  
Address:        150 VERONA ST  
City-St-Zip:    ROCHESTER, NY 14608

Title:            VP  
Name:            POMEROY, MICHAEL C  
Address:        150 VERONA STREET  
City-St-Zip:    ROCHESTER, NY 14608

Title:            DIR  
Name:            LEBLANC, ROBERT M  
Address:        150 VERONA STREET  
City-St-Zip:    ROCHESTER, NY 14608

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: JAMES M. QUINN

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04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date