

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001472

FILED
Jan 27, 2012
Secretary of State

Entity Name: UNIVITA HEALTH INC.

Current Principal Place of Business:

8601 N. SCOTTSDALE ROAD
SUITE 335
SCOTTSDALE, AZ 85253

New Principal Place of Business:

Current Mailing Address:

8601 N. SCOTTSDALE ROAD
SUITE 335
SCOTTSDALE, AZ 85253

New Mailing Address:

FEI Number: 26-3778546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: ECD
Name: LYTLE, L. BEN
Address: 8601 N. SCOTTSDALE ROAD SUITE 335
City-St-Zip: SCOTTSDALE, AZ 85253

Title: PCEO
Name: LYTLE, HUGH H
Address: 8601 N. SCOTTSDALE ROAD SUITE 335
City-St-Zip: SCOTTSDALE, AZ 85253

Title: EVPD
Name: GOLDSTEIN, PETER
Address: 8601 N. SCOTTSDALE ROAD SUITE 335
City-St-Zip: SCOTTSDALE, AZ 85253

Title: CFO
Name: SJOBECK, JEFFREY
Address: 11000 PRAIRIE LAKES DR., SUITE 600
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: SVPS
Name: COGGINS, EILEEN M
Address: 8601 N. SCOTTSDALE ROAD, SUITE 335
City-St-Zip: SCOTTSDALE, AZ 85253

Title: COO
Name: BAUDE, BRUCE
Address: 11000 PRAIRIE LAKES DRIVE SUITE 600
City-St-Zip: EDEN PRAIRIE, MN 55344

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: EILEEN M. COGGINS

SVP

01/27/2012

Electronic Signature of Signing Officer or Director

Date