

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003879

Entity Name: HEALTHTEACHER, INC.

FILED
Aug 26, 2011
Secretary of State

Current Principal Place of Business:

5200 MARYLAND WAY STE 100
BRENTWOOD, TN 37027

New Principal Place of Business:

209 10TH AVENUE SOUTH
STE 350
NASHVILLE, TN 37203

Current Mailing Address:

5500 MARYLAND WAY STE 200
BRENTWOOD, TN 37027

New Mailing Address:

5500 MARYLAND WAY
STE 200
BRENTWOOD, TN 37027

FEI Number: 20-3456491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
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

OFFICERS AND DIRECTORS:

Title: P/D
Name: MCQUIGG, SCOTT
Address: 5200 MARYLAND WAY STE 100
City-St-Zip: BRENTWOOD, TN 37027 US

Title: D
Name: DACKO, TED
Address: 4866 N MAPLE
City-St-Zip: ANN ARBOR, MI 48105 US

Title: D
Name: KARLESKI, KOLEMAN
Address: 101 SOUTH FIFTH STREET STE 1650
City-St-Zip: LOUISVILLE, KY 40202 US

Title: D
Name: FACENTE, GARY
Address: 7915 ST HELENA ROAD
City-St-Zip: SANTA ROSA, CA 95404 US

Title: S
Name: FARRINGTON, SHANNON
Address: 5500 MARYLAND WAY STE 200
City-St-Zip: BRENTWOOD, TN 37027 US

Title: D
Name: VICE, JON
Address: 3292 BURNT PINE LANE
City-St-Zip: MIRAMAR BEACH, FL 32250 US

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: SHANNON FARRINGTON

S

08/26/2011

Electronic Signature of Signing Officer or Director

Date