

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010793

FILED
Jan 03, 2006
Secretary of State

Entity Name: NEIGHBORHOOD HEALTH PARTNERSHIP, INC.

Current Principal Place of Business:

7600 CORPORATE CENTER DRIVE
MIAMI, FL 331261216 US

New Principal Place of Business:

9900 BREN ROAD EAST
(ATTENTION LEGAL DEPARTMENT @ MN008-T202)
MINNETONKA, MN 55343 US

Current Mailing Address:

7600 CORPORATE CENTER DRIVE
MIAMI, FL 331261216 US

New Mailing Address:

FEI Number: 65-0996107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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: DC () Delete
Name: PAPA, JOSEPH R
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 331261216 US

Title: DVC () Delete
Name: FRIES, JOHN T
Address: 7600 CORPORAE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126 US

Title: D () Delete
Name: LUBERT, IRA
Address: C/O LUBERT-ADLER, 1811 CHESTNUT ST 8TH FL
City-St-Zip: PHILADELPHIA, PA 19103 US

Title: D () Delete
Name: GOULD, LEON
Address: 7600 CORPORATE CENTER DR
City-St-Zip: MIAMI, FL 33126 US

Title: D () Delete
Name: RICEVUTO, CHARLES S JR
Address: 7600 CORPORATE CENTER DR
City-St-Zip: MIAMI, FL 33126 US

Title: DP () Delete
Name: POLLACK, DAVID J
Address: 7600 CORPORATE CENTER DR.
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DAVIES, MATTHEW M
Address: 495 NORTH KELLER ROAD, SUITE 200
City-St-Zip: MAITLAND, FL 32751-865 US

Title: DVP (X) Change () Addition
Name: SHEEHY, ROBERT J
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: DVP (X) Change () Addition
Name: WICHMANN, DAVID S
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: DS (X) Change () Addition
Name: MCDONNELL, MICHAEL J
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: DCFO (X) Change () Addition
Name: MIKAN, GEORGE L III
Address: 5901 LINCOLN DRIVE
City-St-Zip: EDINA, MN 55436 US

Title: DAS (X) Change () Addition
Name: LUBBEN, DAVID J
Address: 9900 BREN ROAD EAST
City-St-Zip: MINNETONKA, MN 55343 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL J. MCDONNELL

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01/03/2006

Electronic Signature of Signing Officer or Director

_____ Date