

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010793

FILED
Mar 30, 2011
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:

7600 CORPORATE CENTER DRIVE
MIAMI, FL 33126

Current Mailing Address:

9900 BREN ROAD EAST
(ATTENTION LEGAL DEPARTMENT @ MN008-T502)
MINNETONKA, MN 55343 US

New Mailing Address:

7600 CORPORATE CENTER DRIVE
MIAMI, FL 33126

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

OFFICERS AND DIRECTORS:

Title: D/P
Name: ZAFFIRIS, NICHOLAS J
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126

Title: DVP
Name: COLE, DANIEL MARTIN
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126

Title: D/S
Name: MATTHEWS, JOHN JOSEPH
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126

Title: TREA
Name: OBERRENDER, ROBERT WORTH
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126

Title: DIR
Name: FRIEDRICHS, ROBERT JAMES
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126

Title: DIR
Name: HAGGAR, THOMAS STEPHEN
Address: 7600 CORPORATE CENTER DRIVE
City-St-Zip: MIAMI, FL 33126

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: MANDELINE HENDRICKS

POA

03/30/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date