

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25779

FILED
Jul 14, 2008
Secretary of State

Entity Name: FOCUS HEALTHCARE MANAGEMENT, INC.

Current Principal Place of Business:

720 COOL SPRINGS BLVD
STE 300
FRANKLIN, TN 37067 US

New Principal Place of Business:

6705 ROCKLEDGE DR.
SUITE 900
BETHESDA, MD 20817 US

Current Mailing Address:

77 S BEDFORD ST, STE 200
ATTN: CORP. TAX DEPT.
BURLINGTON, MA 01803 US

New Mailing Address:

6705 ROCKLEDGE DR.
SUITE 900
BETHESDA, MD 20817 US

FEI Number: 62-1266888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FULTON, WILLIAM M
Address: 720 COOL SPRINGS BLVD STE 300
City-St-Zip: FRANKLIN, TN 37067

Title: VP () Delete
Name: GEOFFRION, DONA-MARIE
Address: 720 COOL SPRINGS BLVD STE 300
City-St-Zip: FRANKLIN, TN 37067

Title: TD () Delete
Name: KIRALY, THOMAS
Address: 5080 SPECTRUM DR, 1200 W TOWER
City-St-Zip: ADDISON, TX 75001

Title: VP () Delete
Name: CHEDEKEL, GARY
Address: 77 S BEDFORD ST
City-St-Zip: BURLINGTON, MA 01803

Title: D () Delete
Name: THOMAS, DANIEL J
Address: 5080 SPECTRUM DR, 1200 W TOWER
City-St-Zip: ADDISON, TX 75001

Title: S () Delete
Name: THOMPSON, ELEANOR
Address: 5080 SPECTRUM DR, 100 W. TOWER
City-St-Zip: ADDISON, TX 75001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JAMES, MCGARRY E
Address: 6705 ROCKLEDGE DR.
City-St-Zip: BETHESDA, MD 20817

Title: VP (X) Change () Addition
Name: JOHN, STELBEN J
Address: 6705 ROCKLEDGE DR.
City-St-Zip: BETHESDA, MD 20817

Title: TD (X) Change () Addition
Name: SHAWN, GUERTIN M
Address: 6705 ROCKLEDGE DR.
City-St-Zip: BETHESDA, MD 20817

Title: VP (X) Change () Addition
Name: ARTHUR, LYNCH J
Address: 6705 ROCKLEDGE DR.
City-St-Zip: BETHESDA, MD 20817

Title: D (X) Change () Addition
Name: JAMES, MCGARRY E
Address: 6705 ROCKLEDGE DR.
City-St-Zip: BETHESDA, MD 20817

Title: S (X) Change () Addition
Name: SHIRLEY, SMITH R
Address: 6705 ROCKLEDGE DR.
City-St-Zip: BETHESDA, MD 20817

I hereby certify that the information supplied with this filing does not qualify 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: G. KENNETH ROBINSON

AT

07/14/2008

Electronic Signature of Signing Officer or Director

Date