

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073615

Entity Name: TECHHEALTH, INC.

FILED
Apr 22, 2011
Secretary of State

Current Principal Place of Business:

HIDDEN RIVER CORPORATE CENTER II
14025 RIVEREDGE DR., SUITE 400
TAMPA, FL 336372015

New Principal Place of Business:

Current Mailing Address:

HIDDEN RIVER CORPORATE CENTER II
14025 RIVEREDGE DR., SUITE 400
TAMPA, FL 336372015

New Mailing Address:

FEI Number: 59-3597243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST 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: D
Name: KIERNAN, PETER D III
Address: 14025 RIVEREDGE DR. STE. 400
City-St-Zip: TAMPA, FL 33637

Title: D
Name: KLEINROCK, LEONARD
Address: 14025 RIVEREDGE DR. STE. 400
City-St-Zip: TAMPA, FL 33637

Title: CEO
Name: SWEET, THOMAS R
Address: 14025 RIVEREDGE DR. STE. 400
City-St-Zip: TAMPA, FL 33637

Title: CFO
Name: SCHOPKE, MICHAEL
Address: 14025 RIVEREDGE DR. STE. 400
City-St-Zip: TAMPA, FL 33637

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: THOMAS R. SWEET

CEO

04/22/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date