

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007382

FILED
Apr 18, 2012
Secretary of State

Entity Name: CARDIOSTART USA, INCORPORATED

Current Principal Place of Business:

6110 HARTFORD ST
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

6110 HARTFORD ST
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-3679703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HILTON, THOMAS DR.
1361 13TH AVE. S.
270
JACKSONVILLE,, FL 32250 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: VP
Name: HENSON, JANINE RN
Address: 26912 MEADOW RIDGE DRIVE
City-St-Zip: ELKO, MN 55020

Title: PRES
Name: MARATH, AUBYN MD
Address: 6110 HARTFORD ST
City-St-Zip: TAMPA, FL 33619

Title: TRU
Name: DAVIS, ZEV MD
Address: 1555 N. ASTOR ST., UNIT 6 NE
City-St-Zip: CHICAGO, IL 60610

Title: TRU
Name: HILTON, THOMAS MD
Address: 1361 13TH AVE. S, SUITE 270
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TRU
Name: FRANKLIN, REED
Address: 3800 EAST FOXWOOD LN.
City-St-Zip: IVERNESS, FL 34452

Title: TRU
Name: WENDSCHUH, PHIL MD
Address: 33622 ST. SHARBEL CT.
City-St-Zip: AVON, OH 44011

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS HILTON, MD

TRU

04/18/2012

Electronic Signature of Signing Officer or Director

Date