

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000020348

**Entity Name:** HMS NATIONAL, INC.

**Current Principal Place of Business:**

1625 NW 136TH AVE  
STE210  
FORT LAUDERDALE, FL 33323

**Current Mailing Address:**

P O BOX 551540  
FT LAUDERDALE, FL 33335-1540

**FEI Number: 04-3412211**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

THRAUM, TAMI M  
1625 NW 136TH AVE STE210  
FORT LAUDERDALE, FL 33323 US

*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

**Officer/Director Detail :**

Title VPD  
Name WOLK, HOWARD L  
Address 1625 NW 136TH AVE., STE 210  
City-State-Zip: FT LAUDERDALE FL 33323

Title D  
Name WOLK, SIDNEY D  
Address 1625 NW 136 AVE., #210  
City-State-Zip: FT LAUDERDALE FL 33323

Title P  
Name STEIN, DOUGLAS K  
Address 1625 NW 136 AVE #210  
City-State-Zip: FORT LAUDERDALE FL 33323

Title D  
Name WOLK, JEFFREY C  
Address 1625 NW 136 AVE #210  
City-State-Zip: FT LAUDERDALE FL 33323

Title ST  
Name THRAUM, TAMI M  
Address 1625 NW 136 AVE #210  
City-State-Zip: FORT LAUDERDALE FL 33323

*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: TAMI M. THRAUM**

**SECRETARY**

**04/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date