

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003814

FILED
Apr 24, 2013
Secretary of State
CC1732505659

Entity Name: REALMED/AV CORPORATION

Current Principal Place of Business:

510 EAST 96TH STREET
SUITE 400
INDIANAPOLIS, IN 46240

Current Mailing Address:

510 EAST 96TH STREET
SUITE 400
INDIANAPOLIS, IN 46240 US

FEI Number: 35-1970389

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name BEER, LORI
Address 510 EAST 96TH STREET
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name JESSER, JOHN
Address 510 EAST 96TH STREET
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name KISSEROW, PAUL
Address 510 EAST 96TH STREET
SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name DIVITA, CHUCK
Address 510 EAST 96TH STREET
SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name KRAMZER, JOYCE
Address 510 EAST 96TH STREET
SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name GANI, AARON
Address 510 EAST 96TH STREET
SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name KLINE, TERRI
Address 510 EAST 96TH STREET
SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

Title DIRECTOR
Name REITAN, COLLEEN
Address 510 EAST 96TH STREET
SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

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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: RUSS THOMAS

CEO

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SPAULDING, DAVID
Address 510 EAST 96TH STREET
 SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240

Title CEO (EX-OFFICIO)
Name THOMAS, RUSS
Address 510 EAST 96TH STREET
 SUITE 400
City-State-Zip: INDIANAPOLIS IN 46240