

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000003891

Entity Name: LONGHORN HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

11310 W HWY 290
AUSTIN, TX 78737

Current Mailing Address:

11310 W HWY 290
AUSTIN, TX 78737

FEI Number: 20-2087851

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 E 6TH AVE
TALLAHASSEE, FL 32303 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 P
Name PETERSON, BRITT
Address 4005 GAINES CT
City-State-Zip: AUSTIN TX 78737

Title S
Name CAPITAL, SATORI
Address 2501 N HARWOOD ST FLOOR 21
City-State-Zip: DALLAS TX 75201

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: BRITT PETERSON

CEO

03/17/2016

Electronic Signature of Signing Officer/Director Detail

Date