

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735658

FILED  
Feb 27, 2007  
Secretary of State

**Entity Name:** FLORIDA HEALTH INFORMATION MANAGEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

7510 EHRLICH ROAD  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

7510 EHRLICH ROAD  
TAMPA, FL 33625 US

**New Mailing Address:**

**FEI Number:** 59-1738758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLAVAN, CAROLYN  
7510 EHRLICH ROAD  
TAMPA, FL 33625 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: P ( ) Delete  
Name: WOEMMELL, HOLLY  
Address: 957 RIVIERA POINT DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: PP ( ) Delete  
Name: FLYNN, BARBARA  
Address: 705 E MARKS STREET  
City-St-Zip: ORLANDO, FL 32803 US

Title: PE ( ) Delete  
Name: MOCK, MICHELLE  
Address: 1530 WOODFIELD COURT  
City-St-Zip: LUTZ, FL 33558 US

Title: D ( ) Delete  
Name: BUCK, STACIE  
Address: 4308 SE COVE LAKE CIRCLE #304  
City-St-Zip: STUART, FL 34997 US

Title: D ( ) Delete  
Name: DOUPNIK, ANITA  
Address: 9454 HUNTERS POND DRIVE  
City-St-Zip: TAMPA, FL 33647 US

Title: D ( ) Delete  
Name: CARTER, JENNIFER  
Address: 4871 WATERSIDE POINTE CIRCLE  
City-St-Zip: ORLANDO, FL 32829 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MOCK, MICHELLE  
Address: 1530 WOODFIELD COURT  
City-St-Zip: LUTZ, FL 33558 US

Title: PP (X) Change ( ) Addition  
Name: WOEMMEL, HOLLY  
Address: 957 RIVIERA POINT DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: PE (X) Change ( ) Addition  
Name: BUCK, STACIE  
Address: 6090 GRAND CAY COURT  
City-St-Zip: STUART, FL 34997 US

Title: D (X) Change ( ) Addition  
Name: WHITMER, ELIZABETH  
Address: 115 BAY MAR DRIVE  
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LANGLEY, LORI  
Address: 5155 SAND DOLLAR LANE  
City-St-Zip: NAPLES, FL 34103 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CAROLYN GLAVAN

ED

02/27/2007

Electronic Signature of Signing Officer or Director

Date