

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002951

FILED  
May 01, 2007  
Secretary of State

Entity Name: PASSPORT HEALTH COMMUNICATIONS, INC.

## Current Principal Place of Business:

720 COOL SPRINGS BOULEVARD  
STE. 450  
FRANKLIN, TN 37067

## New Principal Place of Business:

## Current Mailing Address:

720 COOL SPRINGS BOULEVARD  
STE. 450  
FRANKLIN, TN 37067

## New Mailing Address:

FEI Number: 62-1741830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LACKEY, JAMES V JR.  
Address: 720 COOL SPRINGS BOULEVARD  
City-St-Zip: FRANKLIN, TN 37067

Title: D ( ) Delete  
Name: PROCTOR, DANIEL A  
Address: 810 BLACKBERRY HILL  
City-St-Zip: NASHVILLE, TN 37221

Title: V ( ) Delete  
Name: ELY, KEITH E  
Address: 720 COOL SPRINGS BOULEVARD  
City-St-Zip: FRANKLIN, TN 37067

Title: VS ( ) Delete  
Name: BROWN, ROBERT D  
Address: 720 COOL SPRINGS BOULEVARD  
City-St-Zip: FRANKLIN, TN 37067

Title: V (X) Delete  
Name: KINARD, ROBERT W JR  
Address: 720 COOL SPRINGS BLVD.  
City-St-Zip: FRANKLIN, TN 37067

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VS (X) Change ( ) Addition  
Name: CLARK, PHIL  
Address: 720 COOL SPRINGS BOULEVARD  
City-St-Zip: FRANKLIN, TN 37067

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES V. LACKEY

CEO

05/01/2007

Electronic Signature of Signing Officer or Director

Date