

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2006 8:00 am**  
**Secretary of State**

04-25-2006 90101 040 \*\*\*150.00

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| <b>DOCUMENT # F00000004521</b>  |  |   |  |  |  |
| <b>1. Entity Name</b><br>CORSOLUTIONS INC.  |  |   |  |  |  |
| <b>Principal Place of Business</b><br>9500 WEST BRYN MAWR<br>SUITE 500<br>ROSEMONT, IL 60018  |  |   | <b>Mailing Address</b><br>9500 WEST BRYN MAWR<br>SUITE 500<br>ROSEMONT, IL 60018   |  |  |
| <b>2. Principal Place of Business</b><br>Matria Healthcare<br>Suite, Apt. #, etc.<br>1850 Parkway Place   |  |   | <b>3. Mailing Address</b><br>9500 Bryn Mawr<br>Suite, Apt. #, etc.<br>Suite 500  |  |  |
| <b>City &amp; State</b><br>Marietta, GA   |  |   | <b>City &amp; State</b><br>Rosemont, IL  |  |  |
| <b>Zip</b><br>30067   |  | <b>Country</b><br>USA   |  | <b>4. FEI Number</b><br>23-2776413   |  |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>  |  | <b>\$8.75 Additional Fee Required</b>   |  |  |  |
| <b>6. Name and Address of Current Registered Agent</b><br>CT CORPORATION SYSTEM<br>1200 S. PINE ISLAND RD.<br>PLANTATION, FL 33324  |  |   | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code                          |  |  |
| <b>8. 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. I am familiar with, and accept the obligations of registered agent.</b>  |  |   |  |  |  |
| <b>SIGNATURE</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>   |  |   |  |  |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b>   |  | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |  |  |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |  |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>   |  |  |
| <b>TITLE</b><br>PTD<br><b>NAME</b><br>VANCE, RICHARD<br><b>STREET ADDRESS</b><br>9500 W BRYN MAWR AVE., STE 500<br><b>CITY-ST-ZIP</b><br>ROSEMONT, IL 60018   | <input checked="" type="checkbox"/> Delete |   | <b>TITLE</b><br>SOLE DIRECTOR, CHAIRMAN<br><b>NAME</b><br>PARKER H. PETIT<br><b>STREET ADDRESS</b><br>1850 PARKWAY PLACE<br><b>CITY-ST-ZIP</b><br>MARIETTA, GA 30067 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| <b>TITLE</b><br>S<br><b>NAME</b><br>HANNON, THOMAS<br><b>STREET ADDRESS</b><br>9500 W BRYN MAWR AVE., STE 500<br><b>CITY-ST-ZIP</b><br>ROSEMONT, IL 60018   | <input checked="" type="checkbox"/> Delete |   | <b>TITLE</b><br>PRESIDENT<br><b>NAME</b><br>RICHARD M. HASSETT, M.D.<br><b>STREET ADDRESS</b><br>1850 PARKWAY PLACE<br><b>CITY-ST-ZIP</b><br>MARIETTA, GA 30067      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Delete            |   | <b>TITLE</b><br>VICE PRESIDENT<br><b>NAME</b><br>THORNTON A. KUNTZ<br><b>STREET ADDRESS</b><br>1850 PARKWAY PLACE<br><b>CITY-ST-ZIP</b><br>MARIETTA, GA 30067        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Delete            |   | <b>TITLE</b><br>TREASURER<br><b>NAME</b><br>YVONNE V. SCOGGINS<br><b>STREET ADDRESS</b><br>1850 PARKWAY PLACE<br><b>CITY-ST-ZIP</b><br>MARIETTA, GA 30067            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Delete            |   | <b>TITLE</b><br>SECRETARY<br><b>NAME</b><br>ROBERTA L. MCCAW<br><b>STREET ADDRESS</b><br>1850 PARKWAY PLACE<br><b>CITY-ST-ZIP</b><br>MARIETTA, GA 30067              | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Delete            |   | <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b> |  |   |  |  |  |
| <b>SIGNATURE:</b> <i>Robert A. McCaw</i><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>   |  |   | Date <b>3/24/06</b> <span style="float: right;">500-343-6311</span><br>Daytime Phone # <b>823 25</b>   |  |  |



ATTACHMENT  
40061461  
# F00000004521

April 21, 2006

Via Federal Express

Secretary of State  
Division of Corporations  
2670 Executive Center Circle  
Suite 100  
Tallahassee, FL 32301

Re: Annual Report - CorSolutions Inc. - FEI #23-2776413

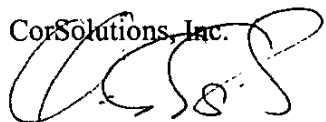
Dear Sir or Madam:

Enclosed please find the executed 2006 For Profit Corporation Annual Report for the captioned entity, together with our check in the amount of \$150.00 representing the fee for filing the Report.

If you have questions or require additional information, please do not hesitate to give me a call.

Sincerely,

CorSolutions, Inc.

  
Lisa A. Ginensky  
Paralegal  
Legal Department

lag w/encl.

cc: John R. Leitz, Jr., Esq.

9500 West Bryn Mawr Avenue • Suite 500 • Rosemont, Illinois • 60018 • (800) 343-6311

