

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90067 010 ***150.00

DOCUMENT # F00000007057

1. Entity Name
AHA FINANCIAL SOLUTIONS, INC.



Principal Place of Business
ONE NORTH FRANKLIN
CHICAGO, IL 60606

Mailing Address
ONE NORTH FRANKLIN
CHICAGO, IL 60606

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04022008

Chg-P

CR2E034 (12/06)

4. FEI Number

36-3076454

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BURKE, ANTHONY J**
STREET ADDRESS **ONE NORTH FRANKLIN ST., 30TH FL**
CITY-ST-ZIP **CHICAGO, IL**

TITLE **D** ☐ Delete
NAME **ANTHONY, PAULA E**
STREET ADDRESS **1000 S BECKHAM**
CITY-ST-ZIP **TYLER, TX 75701**

TITLE **D** ☒ Delete
NAME **GLASER, JOHN P**
STREET ADDRESS **800 BOYLSTON ST, STE 1150**
CITY-ST-ZIP **BOSTON, MA 021998001**

TITLE **D** ☐ Delete
NAME **HARMON, CHERYL**
STREET ADDRESS **1400 W PARK STREET**
CITY-ST-ZIP **URBANA, IL 61801**

TITLE **D** ☐ Delete
NAME **JESUELE, NEIL J**
STREET ADDRESS **ONE NORTH FRANKLIN, 29TH FLOOR**
CITY-ST-ZIP **CHICAGO, IL 60606**

TITLE **VP** ☐ Delete
NAME **BUZACHERO, VICTOR**
STREET ADDRESS **4275 CAMPUS POINT COURT**
CITY-ST-ZIP **SAN DIEGO, CA 92121**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **(See Attached)**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/08
Date

Daytime Phone #

ATTACHMENT

40068917

#F00000007057

AHA Solutions, Inc.

Board of Directors

2008

Paula E. Anthony

VP- Information Technology
ETMC Regional Healthcare System
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Cheryl Harmon (Chairman)

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American Hospital Association Solutions