2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2011
Secretary of State

DOCUMENT# F02000005282

Entity Name: MIDAMERICA HEALTH INC

Current Principal Place of Business:

1499 WINDHORST WAY
100
GREENWOOD, IN 46143

New Principal Place of Business:

Current Mailing Address:

1499 WINDHORST WAY
100
GREENWOOD, IN 46143

New Mailing Address:

FEI Number: 35-1681811 **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

OFFICERS AND DIRECTORS:

Title: DCEO
Name: MATHEWS, WILLIAM R
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143 US

Title: DST
Name: MATHEWS, JACQUELINE J
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143 US

Title: DP
Name: MURPHY, PATRICK M
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143

Title: VP
Name: LOPEZ, JOSE C VP
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143

Title: VP
Name: WHITIS, KIMBERLY VP
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143

Title: D
Name: JARVIS, MICHAEL
Address: 1499 WINDHORST WAY, SUITE 100
City-St-Zip: GREENWOOD, IN 46143 US

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: WILLIAM R. MATHEWS CEO 03/28/2011

Electronic Signature of Signing Officer or Director — Date