2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2011
Secretary of State

DOCUMENT# F04000004075

Entity Name: IN COMPASS HEALTH, INC.

Current Principal Place of Business:

318 MAXWELL ROAD STE. 500
ALPHARETTA, GA 30009

New Principal Place of Business:

Current Mailing Address:

318 MAXWELL ROAD STE. 500
ALPHARETTA, GA 30009

New Mailing Address:

FEI Number: 58-2569897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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: CEO
Name: HOLLOWAY, ROBERT J
Address: 318 MAXWELL ROAD S-500
City-St-Zip: ALPHARETTA, GA 30009

Title: PRE
Name: FULLER, DAN
Address: 318 MAXWELL ROAD S-500
City-St-Zip: ALPHARETTA, GA 30009

Title: CFO
Name: EADE, ARTHUR C
Address: 318 MAXWELL ROAD S-500
City-St-Zip: ALPHARETTA, GA 30009

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: DAN FULLER PRES 03/31/2011

Electronic Signature of Signing Officer or Director — Date