

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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05/01/09--01016--017 \*\*450.00

REINSTATEMENT 07-09

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F05000004872

1. Corporation Name  
Philips Healthcare Informatics, Inc

2. Principal Office Address - No P.O. Box #  
4100 East Third Avenue

3. Mailing Office Address c/o Philips Tax  
200 Franklin Square Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite, 101

City & State

City & State

Foster City, CA

Somerset, NJ

Zip 94404

Country USA

Zip 08773

Country USA

4. Date Incorporated or Qualified To Do Business in Florida 8/18/2005

5. FEI Number 94-3313966  Applied For  Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Corporation Service Company  
Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street, Leon County  
Suite, Apt. #, Etc.  
City Tallahassee State FL Zip Code 32301

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent \_\_\_\_\_ Date \_\_\_\_\_  
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
		See attached	

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Paul Cavanaugh Paul Cavanaugh V.P. 4/1/09  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

5/18/09

## Directors / Officers Report

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As of 4/20/2009

### Philips Healthcare Informatics, Inc.

#### Directors

**Pamela L. Dunlap**

**Director**

Primary Address: 3000 Minuteman Road  
Andover, Massachusetts 01810 (United States)

**Joseph E. Innamorati**

**Director**

Primary Address: 3000 Minuteman Road  
Building One, MS 109  
Andover, Massachusetts 01810 (USA)

#### Officers

**Deborah Disanzo**

**President and Chief Executive Officer**

Primary Address:

**Leslie Steiner**

**Chief Financial Officer**

Primary Address:

**Pamela L. Dunlap**

**Senior Vice President**

Primary Address: 3000 Minuteman Road  
Andover, Massachusetts 01810 (United States)

**Joseph E. Innamorati**

**Senior Vice President**

Primary Address: 3000 Minuteman Road  
Building One, MS 109  
Andover, Massachusetts 01810 (USA)

**Wim Vaatstra**

**Senior Vice President and General Manager**

Primary Address: 4100 East Third Avenue, Suite 101  
Foster City, California 94404 (United States)

**Tom Andriola**

**Vice President**

Primary Address:

**Paul Cavanaugh**

**Vice President**

Primary Address: 3000 Minuteman Road  
Building One  
Andover, Massachusetts 01810

**Paul Cavanaugh**

**Vice President**

Primary Address: 3000 Minuteman Road  
Building One  
Andover, Massachusetts 01810

## Directors / Officers Report

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As of 4/20/2009

### **Philips Healthcare Informatics, Inc.**

**Paul Cavanaugh** Vice President

Primary Address: 3000 Minuteman Road  
Building One  
Andover, Massachusetts 01810

**Raymond C. Fleming** Vice President

Primary Address: 3000 Minuteman Road  
Andover, Massachusetts 01810 (United States)

**Joseph E. Innamorati** Secretary

Primary Address: 3000 Minuteman Road  
Building One, MS 109  
Andover, Massachusetts 01810 (USA)

**David J. Kizner** Assistant Secretary

Primary Address: 4100 East Third Avenue, Suite 101  
Foster City, California 94404 (United States)

**Cynthia MacLean** Assistant Secretary

Primary Address: 3000 Minuteman Road  
Building One  
Andover, Massachusetts 01810