

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000186

Entity Name: ONWARD HEALTHCARE, INC.

FILED  
Jan 04, 2011  
Secretary of State

## Current Principal Place of Business:

64 DANBURY ROAD  
WILTON, CT 06897

## New Principal Place of Business:

## Current Mailing Address:

64 DANBURY ROAD  
WILTON, CT 06897

## New Mailing Address:

FEI Number: 04-3656142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTIN, FL 33331 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: P  
Name: CLARK, KEVIN C  
Address: 64 DANBURY ROAD  
City-St-Zip: WILTON, CT 06897

Title: D  
Name: MACKESY, SCOTT  
Address: C/O WELSH, CARSON, 320 PARK AVE., STE 2500  
City-St-Zip: NEW YORK, NY 10111

Title: T  
Name: DYLAG, MICHAEL  
Address: 64 DANBURY ROAD  
City-St-Zip: WILTON, CT 06897

Title: D  
Name: DONOVAN, MICHAEL  
Address: C/O WELSH, CARSON, 320 PARK AVE., STE 2500  
City-St-Zip: NEW YORK, NY 10111

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: MICHAEL DYLAG

CFO

01/04/2011

Electronic Signature of Signing Officer or Director

Date