2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006198

Entity Name: GET WELL NETWORK, INC.

FILED Feb 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7920 NORFOLK AVE. 11TH FLOOR BETHESDA, MD 208142500 **Current Mailing Address: New Mailing Address:** 7920 NORFOLK AVE, 11TH FLOOR BETHESDA, MD 208142500 FEI Number: 52-2261559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DCEO () Delete () Change () Addition O'NEIL, MICHAEL B JR Name: Name: 7920 NORFOLK AVE, 11TH FLOOR Address: Address: City-St-Zip: BETHESDA, MD 208142500 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BRIENT, PAUL Name: 7920 NORFOLK AVE, 11TH FLOOR Address: Address: BETHESDA, MD 208142500 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition DRUNNAM, BRUCE Name: Name: 7920 NORFOLK AVE, 11TH FLOOR Address: Address: BETHESDA, MD 208142500 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition RAIMONDO, GINA Name: Name: Address: 7920 NORFOLK AVE, 11TH FLOOR Address: City-St-Zip: BETHESDA, MD 208142500 City-St-Zip: Title: Title: () Delete () Change () Addition WRIGHT, DAVID Name: Name: 7920 NORFOLK AVE. 11TH FLOOR Address: Address: City-St-Zip: BETHESDA, MD 208142500 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HACKMAN, LEA Name: 7920 NORFOLK AVE, 11TH FLOOR Address: Address: City-St-Zip: City-St-Zip: BETHESDA, MD 208142500

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL O'NEIL CEO 02/27/2007