

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004752

Entity Name: FISERV HEALTH, INC.

FILED  
Mar 26, 2008  
Secretary of State

## Current Principal Place of Business:

5500 WAYZATA BLVD STE 500  
GOLDEN VALLEY, MN 55416

## New Principal Place of Business:

## Current Mailing Address:

5500 WAYZATA BLVD STE 500  
GOLDEN VALLEY, MN 55416

## New Mailing Address:

FEI Number: 41-1879681

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: YABUKI, JEFFREY W  
Address: 255 FISERV DRIVE  
City-St-Zip: BROOKFIELD, 2I 53045

Title: SCFO ( ) Delete  
Name: KLOPFENSTEIN, KEVIN  
Address: 5500 WAYZATA BLVD STE 500  
City-St-Zip: GOLDEN VALLEY, MN 55416

Title: P ( ) Delete  
Name: ANLIKER, JAY  
Address: 11 SCOTT STREET STE 100  
City-St-Zip: WAUSAU, WI 54403

Title: EVP ( ) Delete  
Name: SCHULZ, PATRICIA  
Address: 5500 WAYZATA BLVD STE 500  
City-St-Zip: GOLDEN VALLEY, MN 55416

Title: VPAS (X) Delete  
Name: JENSEN, JULIA  
Address: 255 FISERV DRIVE  
City-St-Zip: BROOKFIELD, WI 53045

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: ANLIKER, JAY M  
Address: 11 SCOTT STREET  
City-St-Zip: WAUSAU, WI 54403

Title: TREA (X) Change ( ) Addition  
Name: OBERRENDER, ROBERT W  
Address: 9900 BREN ROAD EAST  
City-St-Zip: MINNETONKA, MN 55343

Title: SECR (X) Change ( ) Addition  
Name: LUIS, JUANITA B  
Address: 9900 BREN ROAD EAST  
City-St-Zip: MINNETONKA, MN 55343

Title: DIR (X) Change ( ) Addition  
Name: BURDICK, KENNETH A  
Address: 5901 LINCOLN DRIVE  
City-St-Zip: EDINA, MN 55436

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JUANITA B LUIS

SEC

03/26/2008

Electronic Signature of Signing Officer or Director

Date