

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001305

FILED
Apr 14, 2012
Secretary of State

Entity Name: CARDIONET, INC.

Current Principal Place of Business:

227 WASHINGTON STREET
CONSHOHOCKEN, PA 19428

New Principal Place of Business:

227 WASHINGTON STREET
SUITE 210
CONSHOHOCKEN, PA 19428 US

Current Mailing Address:

227 WASHINGTON STREET
CONSHOHOCKEN, PA 19428

New Mailing Address:

227 WASHINGTON STREET
SUITE 210
CONSHOHOCKEN, PA 19428 US

FEI Number: 33-0604557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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

OFFICERS AND DIRECTORS:

Title: SVPS
Name: FEROLA, PETER SVPS
Address: 227 WASHINGTON STREET, SUITE 210
City-St-Zip: CONSHOHOCKEN, PA 19428 US

Title: D
Name: AHRENS, RONALD A D
Address: 227 WASHINGTON STREET, SUITE 210
City-St-Zip: CONSHOHOCKEN, PA 19428 US

Title: CFO
Name: GETZ, HEATHER C CFO
Address: 227 WASHINGTON STREET, SUITE 210
City-St-Zip: CONSHOHOCKEN, PA 19428 US

Title: DCEO
Name: CAPPER, JOSEPH H DCEO
Address: 227 WASHINGTON STREET, SUITE 210
City-St-Zip: CONSHOHOCKEN, PA 19428 US

Title: D
Name: GORMAN, KIRK E D
Address: 227 WASHINGTON STREET, SUITE 210
City-St-Zip: CONSHOHOCKEN, PA 19428 US

Title: D
Name: RIMEL, REBECCA W D
Address: 227 WASHINGTON STREET, SUITE 210
City-St-Zip: CONSHOHOCKEN, PA 19428 US

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: LAURA LOUIS

POA

04/14/2012

Electronic Signature of Signing Officer or Director

Date