## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F09000000345

Jan 25, 2011 Secretary of State

Entity Name: HEALTH CARE EXCEL, INCORPORATED

**Current Principal Place of Business:** 

New Principal Place of Business:

2629 WATERFRONT PARKWAY EAST DRIVE, STE 200 INDIANAPOLIS, IN 46214

2629 WATERFRONT PARKWAY EAST DRIVE

SUITE 150

INDIANAPOLIS, IN 46214

**Current Mailing Address:** 

New Mailing Address:

2901 OHIO BLVD., SUITE 112 TERRE HAUTE, IN 478032239

FEI Number: 35-1392974

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:

NATIONAL CORPORATE RESEARCH, LTD., INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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

## **OFFICERS AND DIRECTORS:**

IRESON, CAROL R.N. Name:

Address: 2629 WATERFRONT PARKWAY EAST DR, STE. 150

City-St-Zip: INDIANAPOLIS, IN 46214

Title: **VCHR** 

Name: KAERCHER, TOM

Address: 2629 WATERFRONT PARKWAY EAST DRIVE.STE 150

City-St-Zip: INDIANAPOLIS, IN 46214

Title: CEO

KAPUR, MARY Name:

2629 WATERFRONT PARKWAY EAST DRIVE, STE 150 Address:

City-St-Zip: INDIANAPOLIS, IN 46214

Title:

Name: NESIUS, JASON

2629 WATERFRONT PARKWAY EAST DRIVE, STE 200 Address:

City-St-Zip: INDIANAPOLIS, IN 46214

Title:

Name: BARTON, CINDY

2629 WATERFRONT PARKWAY EAST DRIVE,STE 200 Address:

INDIANAPOLIS, IN 46214 City-St-Zip:

Title:

MCNAMEE, ELIZABETH Name:

Address: 2629 WATERFRONT PARKWAY EAST DRIVE, STE 150

INDIANAPOLIS, IN 46214 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY KAPUR CEO 01/25/2011