2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2011
Secretary of State

DOCUMENT# F09000001362

Entity Name: HEALTH IMPACT PARTNERS, INC

Current Principal Place of Business:

2415 NORTH MONROE STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

5 HILLTOP DRIVE
MADISON, CT 06443

New Mailing Address:

FEI Number: 26-4475415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: CDPS
Name: STAGER, MATTHEW PRES
Address: 5 HILLTOP DRIVE
City-St-Zip: MADISON, CT 06443

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: MATTHEW STAGER PRES 04/25/2011

Electronic Signature of Signing Officer or Director Date