

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000722

Entity Name: AVERDE HEALTH, INC.

FILED
Apr 18, 2011
Secretary of State

Current Principal Place of Business:

21 BRACE RD STE 300
WEST HARTFORD, CT 06107

New Principal Place of Business:

21 BRACE RD STE 300
SUITE 300
WEST HARTFORD, CT 06107

Current Mailing Address:

21 BRACE RD STE 300
WEST HARTFORD, CT 06107

New Mailing Address:

21 BRACE RD STE 300
SUITE 300
WEST HARTFORD, CT 06107

FEI Number: 26-3553140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CP
Name: POLICELLI, THOMAS D
Address: 21 BRACE RD STE 300
City-St-Zip: WEST HARTFORD, CT 06107

Title: DV
Name: CLOUSE, GRAYDON
Address: 20 MARSHALL ST #3
City-St-Zip: BROOKLINE, MA 02446

Title: S
Name: BOGOSSIAN, GAIL ESQ
Address: 21 BRACE RD STE 300
City-St-Zip: WEST HARTFORD, CT 06107

Title: T
Name: CAVARAUGH, EUGENE
Address: 21 BRACE RD STE 300
City-St-Zip: WEST HARTFORD, CT 06107

Title: V
Name: WACHTELHAUSEN, ROBERTA
Address: 21 BRACE RD STE 300
City-St-Zip: WEST HARTFORD, CT 06107

Title: V
Name: CHIN, ROBERT
Address: 10 LANCASTER RD
City-St-Zip: WINDHAM, NH 03087

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: GAIL BOGOSSIAN

SECR

04/18/2011

Electronic Signature of Signing Officer or Director

Date