2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001723

City-St-Zip:

() Delete

Title:

Name:

Address:

City-St-Zip:

FILED Jan 03, 2006 Secretary of State

Entity Nan	ne: DST HEA	LTH SOLUTIONS, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
34505 W. TWELVE MILE RD., SUITE 300 FARMINGTON HILLS, MI 48331					PORATE DRIN AM, AL 35242		
Current Mailing Address:				New Mailing Address:			
2100 E. GRAND AVE. APT. A-267 EL SEGUNDO, CA 90245 US				333 WEST 11TH STREET KANSAS CITY, MO 64105 US			
FEI Number:	38-3101704	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1200 S. PIN PLANTATIO		DAD US	ourpose o	f changing it	s registered o	ffice or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip: Title:	GILMORE, LOU 200 W. CESAR AUSTIN, TX 78	CHAVEZ, STE 100		Title: Name: Address: City-St-Zip: Title:	SABINO, A STE 2500 CORPOR BIRMINGHAM,	ATE DRIVE	
Name: Address: City-St-Zip:	RISLEY, MICHA	AEL W NS FREEWAY 8TH FLR.		Name: Address: City-St-Zip:	HAGER, KENNETH V 333 WEST 11TH STREET KANSAS CITY, MO 64105		
Title: Name: Address:	()	Delete		Title: Name: Address:	S () YOUNG, RAND, 333 WEST 11T		

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

KANSAS CITY, MO 64105

333 WEST 11TH STREET

KANSAS CITY, MO 64105

GIVENS, GRÈGG W

() Change (X) Addition

SIGNATURE: KENNETH V. HAGER **VPTD** 01/03/2006