2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004
Secretary of State

DOCUMENT# F94000000508

Entity Name: MEDIQUAL SYSTEMS, INC.

Current Principal Place of Business:

1900 WEST PARK DRIVE
WESTBOROUGH, MA 01581

New Principal Place of Business:

Current Mailing Address:

7000 CARDINAL PLACE
DUBLIN, OH 43017

New Mailing Address:

FEI Number: 36-3112859 **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
TALLHASSEE, 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MILLER, RICHARD J
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: T ( ) Delete
Name: BRANDIN, DONNA
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: P ( ) Delete
Name: THOMAS, STEVEN S
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: VP ( ) Delete
Name: NELSON, MICHAEL
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S ( ) Change (X) Addition
Name: WILLIAMS, PAUL S
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: MICHAEL R. NELSON VP 04/22/2004

Electronic Signature of Signing Officer or Director — Date