

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005660

Entity Name: BRAVO HEALTH, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

3601 O'DONNELL ST.  
BALTIMORE, MD 21224

## New Principal Place of Business:

## Current Mailing Address:

3601 O'DONNELL ST.  
BALTIMORE, MD 21224

## New Mailing Address:

FEI Number: 52-1929677

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: FOLICK, JEFFREY M  
Address: 3601 O'DONNELL ST.  
City-St-Zip: BALTIMORE, MD 21224

Title: D ( ) Delete  
Name: ASPINWALL, MICHAEL  
Address: 100 PEARL ST., 17TH FLOOR  
City-St-Zip: HARTFORD, CT 06103

Title: D ( ) Delete  
Name: JENSEN, DAVID A  
Address: 16 GOULD HILL RD.  
City-St-Zip: CONTOOCOOK, NH 03229

Title: D ( ) Delete  
Name: LINEHAN, CHARLES M  
Address: 2490 SAND HILL RD.  
City-St-Zip: MENLO PARK, CA 94025

Title: D ( ) Delete  
Name: BUJALSKI, EDMUND  
Address: 7401 CARMEL EXECUTIVE PARK, STE 200  
City-St-Zip: CHARLOTTE, NC 28226

Title: D ( ) Delete  
Name: WARD, DAVID  
Address: 30 BURTON HILLS BLVD.  
City-St-Zip: NASHVILLE, TN 37215

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

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

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

SIGNATURE: JEFFREY FOLICK

CEO

04/29/2009

Electronic Signature of Signing Officer or Director

Date