

## **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F99000000640

Entity Name: KELSON PHYSICIAN PARTNERS, INC.

**FILED**  
**Apr 01, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

90 STATE HOUSE SQUARE  
10TH FL  
HARTFORD, CT 06103

**New Principal Place of Business:**

**Current Mailing Address:**

90 STATE HOUSE SQUARE  
10TH FL  
HARTFORD, CT 06103

**New Mailing Address:**

FEI Number: 06-1389869

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: CEO ( ) Delete  
Name: WANNACOTT, JAMES C  
Address: 90 STATE HOUSE SQUARE, 10TH FL  
City-St-Zip: HARTFORD, CT 06103

Title: VPFS ( ) Delete  
Name: WANDS, JEFF  
Address: 90 STATE HOUSE SQ 10TH FLOOR  
City-St-Zip: HARTFORD, FL 06013

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: WANNACOTT, JAMES C  
Address: 90 STATE HOUSE SQUARE, 10TH FL  
City-St-Zip: HARTFORD, CT 06103

Title: SEC (X) Change ( ) Addition  
Name: WANDS, JEFFREY A  
Address: 90 STATE HOUSE SQ 10TH FLOOR  
City-St-Zip: HARTFORD, FL 06013

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: JAMES C. WANNACOTT

CEO

04/01/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date