## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000003545

Entity Name: HDI-HEALTH DIRECT, INC.

FILED Apr 29, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1690 NEW BRITAIN AVENUE

SUITE 105

FARMINGTON, CT 06032 US

Current Mailing Address: New Mailing Address:

175 WATER STREET 18TH FLOOR NEW YORK, NY 10038

FEI Number: 06-1332347 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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: CD

 Name:
 SCHADER, CHARLES R

 Address:
 175 WATER STREET

 City-St-Zip:
 NEW YORK, NY 10038 US

Title: F

 Name:
 ILER, STEVEN A

 Address:
 180 MAIDEN LANE

 City-St-Zip:
 NEW YORK, NY 10038

Title: EVPS

 Name:
 HARKINS, KENNETH V

 Address:
 175 WATER STREET

 City-St-Zip:
 NEW YORK, NY 10038 US

Title: AS

 Name:
 KAUFMAN, WAYNE R

 Address:
 80 PINE STREET

 City-St-Zip:
 NEW YORK, NY 10005

Title: SVP

Name: HURTER, DONALD C
Address: 3505 LAKE LYNDA DREIVE
City-St-Zip: ORLANDO, FL 32817

Title: SVP

 Name:
 ROTHENBERG, BRAD D

 Address:
 180 MAIDEN LANE

 City-St-Zip:
 NEW YORK, NY 10038 US

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: KENNETH HARKINS S 04/29/2011