2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000060362

Entity Name: HEALTH INFORMATION MANAGEMENT ASSOCIATES, INC.

Current Principal Place of Business:

743 SANCTUARTY COVE DRIVE
NORTH PALM BEACH, FL 33410

New Principal Place of Business:

743 SANCTUARY COVE DRIVE
NORTH PALM BEACH, FL 33410

Current Mailing Address:

743 SANCTUARTY COVE DRIVE
NORTH PALM BEACH, FL 33410

New Mailing Address:

743 SANCTUARY COVE DRIVE
NORTH PALM BEACH, FL 33410

FEI Number: 65-1112182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUCK, STACIE L
2062 POLO GARDENS DR., #301
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

BUCK, STACIE L
743 SANCTUARY COVE DRIVE
NORTH PALM BEACH, FL 33410 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: STACIE L BUCK 04/02/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BUCK, STACIE L
Address: 2062 POLO GARDENS DR., #301
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BUCK, STACIE L
Address: 743 SANCTUARY COVE DRIVE
City-St-Zip: NORTH PALM BEACH, FL 33410

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: STACIE L. BUCK P 04/02/2002
Electronic Signature of Signing Officer or Director Date