

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000063206

FILED
Apr 28, 2009
Secretary of State

Entity Name: ALIGNMENT HEALTH SYSTEMS INC

Current Principal Place of Business:

10415 N KENDALL DR STE B210
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

10415 N KENDALL DR STE B210
MIAMI, FL 33176

New Mailing Address:

FEI Number: 26-0272899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERSON, RICHARD
10415 N KENDALL DR B210
MIAMI, FL 33176 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: ELLIS, JULIE M
Address: 10415 N KENDALL DRIVE UNIT B210
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: PETERSON, RICHARD
Address: 10415 N KENDALL DR B210
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD PETERSON

MR

04/28/2009

Electronic Signature of Signing Officer or Director

Date