2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# P08000041343

Entity Name: HEALTH INFORMATION PROFESSIONALS, INC.

Current Principal Place of Business:

600 1/2 SILVERTON ST.
ORLANDO, FL 34746

New Principal Place of Business:

600 1/2 SILVERTON ST.
ORLANDO, FL 32808

Current Mailing Address:

600 1/2 SILVERTON ST.
ORLANDO, FL 34746

New Mailing Address:

600 1/2 SILVERTON ST.
ORLANDO, FL 32808

FEI Number: 26-2496672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOVELACE, LISA K
600 1/2 SILVERTON ST.
ORLANDO, FL 32808 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: P
Name: LOVELACE, LISA K
Address: 600 1/2 SILVERTON ST.
City-St-Zip: ORLANDO, FL 32808

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: LISA LOVELACE MS. 01/05/2012

Electronic Signature of Signing Officer or Director — Date