

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000012866

Entity Name: MEDALLION HEALTH, INC.

FILED
Feb 23, 2012
Secretary of State

Current Principal Place of Business:

500 N OSCEOLA AVE
SUITE G
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

500 N OSCEOLA AVE
SUITE G
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 27-1884945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, BRETT S
500 N OSCEOLA AVE
SUITE G
CLEARWATER, FL 33755 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: PRES
Name: MILLER, BRETT S
Address: 500 N OSCEOLA AVE SUITE G
City-St-Zip: CLEARWATER, FL 33755

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: BRETT S. MILLER

PRES

02/23/2012

Electronic Signature of Signing Officer or Director

Date