2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000076496

Entity Name: COGNITION HEALTH PARTNERS, INC.

FILED Jan 18, 2012 Secretary of State

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

3127 THOMAS DRIVE 100 RICHARD JACKSON BLVD

PANAMA CITY BEACH, FL 32407 SUITE 120

PANAMA CITY BEACH, FL 32407

Current Mailing Address: New Mailing Address:

3127 THOMAS DRIVE 100 RICHARD JACKSON BLVD

PANAMA CITY BEACH, FL 32407 SUITE 120

PANAMA CITY BEACH, FL 32407

FEI Number: 27-3495095 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:

WILSON, STEPHEN R
3127 THOMAS DRIVE
WILSON, STEPHEN R
100 RICHARD JACKSON BLVD

PANAMA CITY BEACH, FL 32407 US SUITE 120
PANAMA CITY BEACH, FL 32407 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: 01/18/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: WILSON, STEPHEN R

Address: 100 RICHARD JACKSON BLVD, SUITE 120

City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: D

Name: BUCKAREFF, RUEBEN

Address: 100 RICHARD JACKSON BLVD, SUITE 120

City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: D

Name: DESPRES, PAUL

Address: 100 RICHARD JACKSON BLVD, SUITE 120

City-St-Zip: PANAMA CITY BEACH, FL 32407

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: DAVID BRANDON CFO 01/18/2012