

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000024019

FILED
Apr 11, 2012
Secretary of State

Entity Name: ALL-MED MANAGEMENT SYSTEMS OF GEORGIA, INC.

Current Principal Place of Business:

14101 COMMERCE WAY
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

14101 COMMERCE WAY
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 45-1009687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALE, DONNA M
14101 COMMERCE WAY
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: MAUREEN CATHELL

04/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WILL CUTTS, H. DAVID
Address: 3700 COMMERCE PARKWAY
City-St-Zip: MIRAMAR, FL 33025

Title: VPTD
Name: SJOBECK, JEFFREY J
Address: 11000 PRAIRIE LAKES DRIVE, SUITE 600
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: GCDS
Name: COGGINS, EILEEN M ESQ.
Address: 8601 N. SCOTTSDALE ROAD, SUITE 335
City-St-Zip: SCOTTSDALE, AZ 85253

Title: SVP
Name: COGGINS, EILEEN M ESQ.
Address: 8601 N. SCOTTSDALE ROAD, SUITE 335
City-St-Zip: SCOTTSDALE, AZ 85253

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: EILEEN M. COGGINS, ESQ.

S

04/11/2012

Electronic Signature of Signing Officer or Director

Date