

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000028774

FILED  
Mar 23, 2012  
Secretary of State

Entity Name: SHAKER HEALTH HOLDINGS, INC,

**Current Principal Place of Business:**

2790 N MILITARY TRAIL  
7  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

2790 N MILITARY TRAIL  
7  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

FEI Number: 45-4706177      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SPLAIN, M. DANIEL III  
2790 N. MILITARY TRAIL  
7  
WEST PALM BEACH, FL 33409 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: VP  
Name: SPLAIN, M. DANIEL  
Address: 23199 SHAKER BOULEVARD  
City-St-Zip: SHAKER HEIGHTS, OH 44122 US

Title: PRES  
Name: STOLKOWSKI, ELIZABETH L  
Address: 23199 SHAKER BOULEVARD  
City-St-Zip: SHAKER HEIGHTS, OH 44122 US

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: M DANIEL SPLAIN

VP

03/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date