

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000085902

Entity Name: AFFINITY HEALTH CORP.

FILED
Apr 20, 2012
Secretary of State

Current Principal Place of Business:

700 E. BLACKHAWK AVE.
SUITE 6
PRAIRIE DU CHIEN, WI 53821

New Principal Place of Business:

820 S. WACOUTA AVE
PRAIRIE DU CHIEN, WI 53821

Current Mailing Address:

700 E. BLACKHAWK AVE.
SUITE 6
PRAIRIE DU CHIEN, WI 53821

New Mailing Address:

820 S. WACOUTA AVE.
PRAIRIE DU CHIEN, WI 53821

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

Name and Address of Current Registered Agent:

LAKE, BRYAN J
1308 HARRY SUTTON ROAD
MELBOURNE, FL 32901 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: LAKE, BRYAN J
Address: 820 S. WACOUTA AVE.
City-St-Zip: PRAIRIE DU CHIEN, WI 53821 US

Title: VP
Name: GEHRMANN, TIMOTHY
Address: 37496 US HIGHWAY 18
City-St-Zip: PRAIRIE DU CHIEN, WI 53821 US

Title: VP
Name: GILOT, MICHAEL
Address: 3102 MAPLE AVE.
City-St-Zip: DALLAS, TX 75201 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: BRYAN J. LAKE

P

04/20/2012

Electronic Signature of Signing Officer or Director

Date