2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N1000006763

Entity Name: HEALTH-ISAC, INC.

Current Principal Place of Business:

226 NORTH NOVA ROAD STE 391 ORMOND BEACH, FL 32174

Current Mailing Address:

HEALTH-ISAC INC. DBA H-ISAC 226 NORTH NOVA ROAD #391 ORMOND BEACH, FL 32174 US

FEI Number: 27-4700010

Name and Address of Current Registered Agent:

ANDERSON, DENISE HEALTH-ISAC INC. DBA H-ISAC 226 NORTH NOVA ROAD #391 ORMOND BEACH, FL 32174 US Certificate of Status Desired: Yes

The above named antity submits this statement for the number of changing its registered affice or registered agent, or both, in the State of Elevida

| The above named e | entity submits this statement for the purpose of changing its regis | tered office or regis | tered agent, or both, in the State of Flo | orida. |
|-------------------|---|-----------------------|---|------------|
| SIGNATURE: | DENISE ANDERSON | | | 06/03/2022 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Direct | tor Detail : | | | |
| Title | PRESIDENT | Title | COO | |
| Name / | ANDERSON, DENISE | Name | JOSEPH, LINDA J | |
| | 226 NORTH NOVA ROAD STE 391 | Address | 226 NORTH NOVA ROAD STE 391 | |
| City-State-Zip: | ORMOND BEACH FL 32174 | City-State-Zip: | ORMOND BEACH FL 32174 | |
| Title | CSO | Title | DIRECTOR | |
| Name | WEISS, ERROL | Name | MAYERS, ADRIAN | |
| | 226 NORTH NOVA ROAD STE 391 | Address | 226 NORTH NOVA ROAD STE 391 | |
| City-State-Zip: | ORMOND BEACH FL 32174 | City-State-Zip: | ORMOND BEACH FL 32174 | |
| Title | DIRECTOR | Title | DIRECTOR | |
| Name | SANTIAGO, ANAHI | Name | CINCERA, BRIAN | |
| | 226 NORTH NOVA ROAD STE 391 | Address | 226 NORTH NOVA ROAD STE 391 | |
| City-State-Zip: | ORMOND BEACH FL 32174 | City-State-Zip: | ORMOND BEACH FL 32174 | |
| Title | DIRECTOR | Title | DIRECTOR | |
| Name I | BARNES, GREG | Name | RASMUSSEN, JOHN | |
| | 226 NORTH NOVA ROAD STE 391 | Address | 226 NORTH NOVA ROAD STE 391 | |
| City-State-Zip: | ORMOND BEACH FL 32174 | City-State-Zip: | ORMOND BEACH FL 32174 | |

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DENISE ANDERSON

PRESIDETN/CEO

06/03/2022

Electronic Signature of Signing Officer/Director Detail

FILED Jun 03, 2022 Secretary of State 1005127941CC

Officer/Director Detail Continued :

| Title | DIRECTOR | Title | DIRECTOR |
|---|---|---|---|
| Name | ALLISON, MARENE | Name | MCNEIL, MICHAEL |
| Address | 226 NORTH NOVA ROAD STE 391 | Address | 226 NORTH NOVA ROAD STE 391 |
| City-State-Zip: | ORMOND BEACH FL 32174 | City-State-Zip: | ORMOND BEACH FL 32174 |
| Title | DIRECTOR | Title | DIRECTOR |
| Name | TOWERS, MICHAEL | Name | SUVER, ROISIN |
| Address | 226 NORTH NOVA ROAD STE 391 | Address | 226 NORTH NOVA ROAD STE 391 |
| City-State-Zip: | ORMOND BEACH FL 32174 | City-State-Zip: | ORMOND BEACH FL 32174 |
| | | | |
| Title | DIRECTOR | Title | DIRECTOR |
| Title Name | DIRECTOR NICHOLS, SCOTT | Title Name | DIRECTOR BARNES, TJ |
| | | | |
| Name | NICHOLS, SCOTT 226 NORTH NOVA ROAD STE 391 | Name | BARNES, TJ 226 NORTH NOVA ROAD STE 391 |
| Name Address | NICHOLS, SCOTT 226 NORTH NOVA ROAD STE 391 | Name Address | BARNES, TJ 226 NORTH NOVA ROAD STE 391 |
| Name Address City-State-Zip: | NICHOLS, SCOTT 226 NORTH NOVA ROAD STE 391 ORMOND BEACH FL 32174 | Name Address City-State-Zip: | BARNES, TJ 226 NORTH NOVA ROAD STE 391 ORMOND BEACH FL 32174 |
| Name Address City-State-Zip: Title | NICHOLS, SCOTT 226 NORTH NOVA ROAD STE 391 ORMOND BEACH FL 32174 DIRECTOR | Name Address City-State-Zip: Title | BARNES, TJ 226 NORTH NOVA ROAD STE 391 ORMOND BEACH FL 32174 DIRECTOR |