

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041343

Entity Name: HEALTH INFORMATION PROFESSIONALS, INC.

Current Principal Place of Business:

600 1/2 SILVERTON ST.
ORLANDO, FL 32808

Current Mailing Address:

600 1/2 SILVERTON ST.
ORLANDO, FL 32808

FEI Number: 26-2496672

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

IFILL, DION G
600 1/2 SILVERTON ST.
ORLANDO, FL 32808 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: DION IFILL

01/13/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LOVELACE, LISA K
Address 600 1/2 SILVERTON ST.
City-State-Zip: ORLANDO FL 32808

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: LISA LOVELACE

PRESIDENT

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date