

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000052034

Entity Name: HOSPITALIST INFORMATION PARTNERS, INC.

Current Principal Place of Business:

16132 SUNCREST SHORES DRIVE
ODESSA, FL 33556

Current Mailing Address:

16132 SUNCREST SHORES DRIVE
ODESSA, FL 33556

FEI Number: 27-0374923

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DERUELLE, ERIN
16132 SUNCREST SHORES DRIVE
ODESSA, FL 33556 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name DERUELLE, DENNIS
Address 16132 SUNCREST SHORES DRIVE
City-State-Zip: ODESSA FL 33556

Title VP
Name DERUELLE, ERIN
Address 16132 SUNCREST SHORES DRIVE
City-State-Zip: ODESSA FL 33556

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: ERIN DERUELLE

VICE PRESIDENT

09/23/2015

Electronic Signature of Signing Officer/Director Detail

Date