

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000804

Entity Name: MERGE HEALTHCARE SOLUTIONS INC.

Current Principal Place of Business:

900 WALNUT RIDGE DRIVE
HARTLAND, WI 53029

Current Mailing Address:

900 WALNUT RIDGE DRIVE
HARTLAND, WI 53029

FEI Number: 59-2248411

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT
Name LE GRAND, ANNE
Address 75 BINNEY STREET
City-State-Zip: CAMBRIDGE MA 02142

Title SECRETARY
Name FLINT, LAWRENCE B.
Address ONE ROGERS STREET
City-State-Zip: CAMBRIDGE MA 02142

Title TREASURER
Name BEAUMONT, SIMON J.
Address ONE NEW ORCHARD ROAD
City-State-Zip: ARMONK NY 10504

Title ASSISTANT SECRETARY
Name SCHUMITSCH, JULIE ANN B.
Address 900 WALNUT RIDGE DRIVE
City-State-Zip: HARTLAND WI 53029

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: JULIE ANN B. SCHUMITSCH

ASSISTANT SECRETARY 04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date