

2015 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:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 P
Name DEARBORN, JUSTIN C
Address 350 NORTH ORLEANS STREET
FIRST FLOOR
City-State-Zip: CHICAGO IL 60654

Title T
Name ORESKOVICH, STEVEN M
Address 900 WALNUT RIDGE DRIVE
City-State-Zip: HARTLAND WI 53029

Title S
Name DEARBORN, JUSTIN C
Address 350 NORTH ORLEANS STREET
FIRST FLOOR
City-State-Zip: CHICAGO IL 60654

Title AS
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

**CORPORATE RISK
MANAGER, MERGE
EQUITIES DIRECTOR &
ASSISTANT CORPORATE
SECRETARY**

04/30/2015

