## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006812

Entity Name: SOURCEHOV HEALTHCARE, INC.

**Current Principal Place of Business:** 

2701 EAST GRAUWYLER ROAD

IRVING, TX 75061

**Current Mailing Address:** 

2701 EAST GRAUWYLER ROAD IRVING, TX 75061 US

FEI Number: 57-0835087 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

FILED Apr 20, 2017

**Secretary of State** 

CC9926536503

Officer/Director Detail:

TitlePRESIDENTTitleDIRECTOR, CEONameBOOZER, AMYNameCOGBURN, RONALD

Address 2701 EAST GRAUWYLER ROAD Address 2701 EAST GRAUWYLER ROAD

City-State-Zip: IRVING TX 75061 City-State-Zip: IRVING TX 75061

Title SECRETARY, DIRECTOR, VP Title DIRECTOR

Name KEITH, JEDD Name YANNAMANI, SURESH

Address 2701 EAST GRAUWYLER ROAD Address 2701 EAST GRAUWYLER ROAD

City-State-Zip: IRVING TX 75061 City-State-Zip: IRVING TX 75061

Title VP Title CFO

Name EMERICK, KAREN A. Name TRIVETTE, MARK

Address 2701 EAST GRAUWYLER ROAD Address 2701 EAST GRAUWYLER ROAD

City-State-Zip: IRVING TX 75061 City-State-Zip: IRVING TX 75061

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: KAREN A. EMERICK VICE PRESIDENT

Electronic Signature of Signing Officer/Director Detail

04/20/2017

Date