

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000000649

**Entity Name:** MANAGEMENT HEALTH SOLUTIONS, INC.

**Current Principal Place of Business:**

10150 HIGHLAND MANOR DR SUITE 240  
TAMPA, FL 33610

**Current Mailing Address:**

99 HAWLEY LANE  
SUITE 1201  
STRATFORD, CT 06614-1202 US

**FEI Number: 11-3472971**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

STITT, LORI L  
10150 HIGHLAND MANOR DR SUITE 240  
TAMPA, FL 33610 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           DIRECTOR, PRESIDENT, CEO  
Name           CAMPBELL, BRIAN  
Address        99 HAWLEY LANE  
                  SUITE 1201  
City-State-Zip: STRATFORD CT 06614-1202

Title           SECRETARY, TREASURER, CFO  
Name           LEDWICK, TIM  
Address        99 HAWLEY LANE  
                  SUITE 1201  
City-State-Zip: STRATFORD CT 06614-1202

Title           CHAIRMAN  
Name           MURPHY, EDWARD G  
Address        99 HAWLEY LANE  
                  SUITE 1201  
City-State-Zip: STRATFORD CT 06614-1202

Title           VP  
Name           KILEY, KEVIN P  
Address        99 HAWLEY LANE  
                  SUITE 1201  
City-State-Zip: STRATFORD CT 06614-1202

*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: KEVIN P KILEY**

**VP**

**03/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date