RI SOS Filing Number: 200940017380 Date: 01/07/2009 3:20 PM

State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $50.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

Foreign Business Corporation
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR: 2009

1. Corporate ID No. 000148147

2. Name of Corporation ASSOCIATION HEALTH CARE MANAGEMENT, INC.

3. Street Address Principal Business Office:

No. and Street: 11111 RICHMOND STREET, SUITE 200
City or Town: HOUSTON State: TX Zip: 77082 Country: USA

4. Business Phone No.

713.270.1111

5. State of Incorporation

State: TX

6. Brief Description of the Character of Business Conducted in Rhode Island

Discount Medical Plan

7. Names and Addresses of the Officers and Directors:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	JOYCE ANTRICH	11111 RICHMOND AVE., SUITE 200 HOUSTON, TX 77082 USA
CFO	OMAR KASANI	11111 RICHMOND AVE., SUITE 200 HOUSTON, TX 77082 USA
PRESIDENT	MICHAEL RABIE	11111 RICHMOND STREET, SUITE 200 HOUSTON, TX 77082- USA
DIRECTOR	GENE COPE	8590 ARIEL ST. HOUSTON, TX 77074 USA
DIRECTOR	MICHAEL RABIE	11111 RICHMOND AVE., SUITE 200 HOUSTON, TX 77082 USA

0-5924-0

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CWP		$0.01	15,000,000.00	4965933

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 7 Day of January, 2009 at 3:21:22 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JULIE MILLER
Signature of Authorized Representative of the Corporation

ATTORNEY
Title

Form No. 630
Revised 09/07

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