



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(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: 2012

1. Corporate ID No. 000161156

2. Name of Corporation SOLIANT HEALTH, INC.

3. Street Address Principal Business Office:

No. and Street: 10151DEERWOOD PARK BLVD.
BLDG. 200, STE 400

City or Town: JACKSONVILLE State: FL Zip: 32256 Country: USA

4. Business Phone No.

5. State of Incorporation

State: GA

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

PROFESSIONAL HEALTHCARE STAFFING AGENCY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|---------------------|--|--|
| TREASURER | LORELEI DEPALO | 175 BROAD HOLLOW RD. MELVILLE, NY 11747 USA |
| SECRETARY | GREGORY D. HOLLAND | 10151 DEERWOOD PARK BLVD., BLDG 200, STE 400 JACKSONVILLE, FL 32256 USA |
| CEO | THERON I. GILLIAM | 175 BROAD HOLLOW RD. MELVILLE, NY 11747 USA |
| CFO | STEPHEN NOLAN | 175 BROAD HOLLOW RD. MELVILLE, NY 11747 USA |
| PRESIDENT | DAVID K ALEXANDER | 1979 LAKESIDE PARKWAY, SUITE 800 ATLANTA, GA 30084- USA |
| VICE PRESIDENT | DAWN EHRHART | 175 BROAD HOLLOW ROAD MELVILLE, NY 11747 USA |
| ASSISTANT SECRETARY | DIANA R. KARABELAS | 175 BROAD HOLLOW RD. MELVILLE, NY 11747 USA |
| DIRECTOR | THERON I. GILLIAM | 175 BROAD HOLLOW RD. MELVILLE, NY 11747 USA |
| DIRECTOR | STEPHEN NOLAN | 175 BROAD HOLLOW RD. MELVILLE, NY 11747 USA |

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 |
|----------------|-----------------|---------------------|---|---|
| CNP | | \$0.00 | 1,000.00 | 1000 |

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 27 Day of February, 2012 at 11:05:50 AM. 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 DAWN EHRHART

Signature of Authorized Representative of the Corporation

SVP -TAXES

Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

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