



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: 2015

1. Corporate ID No. 000906391

2. Name of Corporation Passport Health Communications, Inc.

3. Street Address Principal Business Office:

No. and Street: 475 ANTON BOULEVARD

City or Town: COSTA MESA

State: CA

Zip: 92626

Country: USA

4. Business Phone No.

7148307446

5. State of Incorporation

State: DE

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

HEALTHCARE PATIENT MANAGEMENT AND INFORMATION SERVICES

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
PRESIDENT	SCOTT BAGWELL	475 ANTON BLVD. COSTA MESA, CA 92626 USA
TREASURER	SCOTT WHEELER	475 ANTON BLVD. COSTA MESA, CA 92626 USA
SECRETARY	JASON ENGEL	475 ANTON BLVD. COSTA MESA, CA 92626 USA
ASSISTANT SECRETARY	CRISTA HARWOOD	475 ANTON BLVD. COSTA MESA, CA 92626 USA
VICE PRESIDENT	ROBERT KNOWLTON	475 ANTON BLVD.

DIRECTOR	CRAIG BOUNDY	COSTA MESA, CA 92626 USA 475 ANTON BLVD. COSTA MESA, CA 92626 USA
DIRECTOR	DARRYL GIBSON	475 ANTON BLVD. COSTA MESA, CA 92626 USA
DIRECTOR	SCOTT WHEELER	475 ANTON BLVD. COSTA MESA, CA 92626 USA
DIRECTOR	JENNIFER SCHULZ	475 ANTON BLVD. COSTA MESA, CA 92626 USA
DIRECTOR	SCOTT BAGWELL	475 ANTON BLVD. COSTA MESA, CA 92626 USA

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	100.00	100

**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 25 Day of February, 2015 at 2:26:41 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 SCOTT WHEELER  
Signature of Authorized Representative of the Corporation

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

Form No. 630  
Revised 09/07

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