

1.) CORPORATION NAME:

AMERICAN HEALTH HOLDING, INC.

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1660648**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	15,000
COMBNV	135,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7400 West Campus Road

CITY/ST/ZIP: New Albany, OH 43054-8725

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: PAUL E LAVIN TITLE: CEO/ President ADDRESS: 7400 West Campus Road CITY/ST/ZIP/CO: New Albany, OH 43054-8725</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: Elaine Rose Cofrancesco TITLE: VP/TREASURER ADDRESS: 7400 West Campus Road CITY/ST/ZIP/CO: New Albany, OH 43054-8725</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: Edward Chung-I Lee TITLE: SECRETARY ADDRESS: 7400 West Campus Road CITY/ST/ZIP/CO: New Albany, OH 43054-8725</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: Mark W. Schmidt TITLE: CHAIRMAN ADDRESS: 7400 West Campus Road CITY/ST/ZIP/CO: New Albany, OH 43054-8725</p>	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Vincent DiMura TITLE: CONTROLLER ADDRESS: 7400 West Campus Road CITY/ST/ZIP/CO: New Albany, OH 43054-8725</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: Ronald Gibb TITLE: COO ADDRESS: 7400 West Campus Road CITY/ST/ZIP/CO: New Albany, OH 43054-8725</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR

NAME:	William Wilkin	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	7400 West Campus Road		
CITY/ST/ZIP/CO:	New Albany, OH 43054-8725		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ Edward Chung-I Lee	Edward Chung-I Lee, SECRETARY	2/5/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.