No. C 168564	Due no later than August 31, 2007	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address - Correct in this box, if applicable so HEALTH MANAGEMENT SYSTEMS, INC. 401 PARK AVE S NEW YORK, NY 10016	CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE, ID 83702 3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Corporations: Enter Nan	nes and Business Addresses of President, Secret	ary and Directors.
Office held Name	Street or P.O. Address City	
President & William C.	Lucra 1140 Empire Central Drive D Suite 450	Dallos TX 75247
	1. Holster 401 Park Avenue South No	
Director Kobert IV	1. HO/S PCT 101	declar
5. Organized Under the Laws of: NEW YORK C 168564	Name (Typod or Walter D. Hos	
Issued 06/01/2007	Do Not Tape or Staple	200708004185