2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2008
Secretary of State

DOCUMENT# L01000014094

Entity Name: UNISOURCE MANAGED CARE SERVICES, LLC

Current Principal Place of Business:

1408 N. WESTSHORE BLVD
700
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

6010 CATTLE RIDGE DRIVE
SUITE 100
SARASOTA, FL 34232

New Mailing Address:

6010 CATTLERIDGE DRIVE
SUITE 100
SARASOTA, FL 34232

FEI Number: 59-3742003 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OLWERT, ANDREW W
6010 CATTERIDGE DRIVE
SUITE 100
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	OLWERT, ANDREW W III	
Address:	6010 CATTLERIDGE DRIVE	
City-St-Zip:	SARASOTA, FL 34232	
Title:	VP	(X) Delete
Name:	RODKEY, LEN	
Address:	6010 CATTLERIDGE DRIVE	
City-St-Zip:	SARASOTA, FL 34232	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DIANE MCCOY EC 03/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date