

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500000181

**Entity Name:** HEALTH NETWORK GROUP, LLC

**Current Principal Place of Business:**

30 FOX HUNT DR  
UNIT 30  
BEAR, DE 19701

**FILED**  
**Apr 05, 2016**  
**Secretary of State**  
**CC3701767096**

**Current Mailing Address:**

301 CLEMATIS STREET  
SUITE 3000  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 47-2834406

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SULLIVAN, ERIKA L ESQ  
301 CLEMATIS STREET  
SUITE 3000  
WEST PALM BEACH, FL 33401 US

*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

**Authorized Person(s) Detail :**

Title            CEO  
Name            SULLIVAN, SEAN  
Address        301 CLEMATIS STREET  
                  SUITE 3000  
City-State-Zip: WEST PALM BEACH FL 33401

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SEAN P SULLIVAN

CEO

04/05/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date