2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000983

Entity Name: CONSUMER DIRECTED HEALTHPLANS, INC.

FILED Jan 15, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
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861 SW 78TH AVE., SUITE 200 2941 W CYPRESS CREEK ROAD PLANTATION, FL 33324 SUITE 202

FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

861 SW 78TH AVE., SUITE 200 2941 W CYPRESS CREEK ROAD PLANTATION, FL 33324 SUITE 202

FORT LAUDERDALE, FL 33309

FEI Number: 20-1968928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HERRERA, CARLOS M D HERRERA, CARLOS M D 2941 W CYPRESS CREEK ROAD 861 SW 78TH AVE., SUITE 200 PLANTATION, FL 33324 FORT LAUDERDALE, FL 33309 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: CARLOS M HERRERA 01/15/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HERRERA, CARLOS HERRERA, CARLOS Name: Name: 861 SW 78TH AVE., SUITE 200 2941 W CYPRESS CREEK ROAD Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: FORT LAUDERDALE, FL 33309

Title: Title: () Delete (X) Change () Addition

Name: LUIS. RENE Name: LUIS RENE

861 SW 78TH AVE., SUITE 200 2941 W CYPRESS CREEK ROAD Address: Address: PLANTATION, FL 33324 FORT LAUDERDALE, FL 33309 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

BONDS, CAROLINE Name: DISDGIERTT, DANIEL Name:

861 SW 78TH AVE., SUITE 200 2941 W CYPRESS CREEK ROAD Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: FORT LAUDERDALE, FL 33309

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS M HERRERA D 01/15/2009