

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003373

Entity Name: HBDC II, INC.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

2200 SW 10TH ST  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

## Current Mailing Address:

2200 SW 10TH ST  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

FEI Number: 20-3469415

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INSURINT CORPORATION  
2200 SW 10TH ST  
DEERFIELD BEACH, FL 33442 US

## Name and Address of New Registered Agent:

HEALTH BENEFITS DIRECT  
2200 SW 10TH ST  
DEERFIELD BEACH, FL 33442 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: HEALTH BENEFITS DIRECT

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO (X) Delete  
Name: CLEMENS, ALVIN  
Address: 150 NORTH RADNOR CHESTER RD, SUITE B-101  
City-St-Zip: RADNOR, PA 19087

Title: COO ( ) Delete  
Name: EISSA, CHARLES A  
Address: 2200 SW 10TH ST  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: CFO ( ) Delete  
Name: VERDI, ANTHONY  
Address: 150 NORTH RADNOR CHESTER RD, SUITE B-101  
City-St-Zip: RADNOR, PA 19087

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: COO (X) Change ( ) Addition  
Name: EISSA, CHARLES A  
Address: 2200 SW 10TH ST  
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: CFO (X) Change ( ) Addition  
Name: VERDI, ANTHONY  
Address: 150 NORTH RADNOR CHESTER RD, SUITE B-101  
City-St-Zip: RADNOR, PA 19087 US

Title: SEC. ( ) Change (X) Addition  
Name: GILLAN, FRANK  
Address: 150 N. RADNOR CHESTER RD. STE B-101  
City-St-Zip: RADNOR, PA 19087 US

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: CHARLES EISSA

COO

04/30/2008

Electronic Signature of Signing Officer or Director

Date