

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018244

FILED  
Apr 09, 2005  
Secretary of State

Entity Name: HEALTH RESOURCES SOLUTIONS, L.C.

**Current Principal Place of Business:**

1940 SOUTH CLUB DRIVE  
WEST PALM BEACH, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

1940 SOUTH CLUB DRIVE  
WEST PALM BEACH, FL 33414

**New Mailing Address:**

FEI Number: 02-0554264      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PATEL, SUDHIR  
1940 SOUTH CLUB DRIVE  
WEST PALM BEACH, FL 33414      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/MEMBERS:**

Title: MGR      ( ) Delete  
Name: PATEL, BHASKER  
Address: 3074 RIO PLUMOSA N. BLVD.  
City-St-Zip: INDIALANTIC, FL 32903

Title: MGR      ( ) Delete  
Name: PATEL, SUDHIR  
Address: 1940 SOUTH CLUB DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: MGR      ( ) Delete  
Name: PATEL, SARJU H  
Address: 76 HOWCROFT ROAD  
City-St-Zip: MAYWOOD, NJ 07607

**ADDITIONS/CHANGES:**

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

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 for the exemption stated in Section 119.07(3)(i), 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: BHASKER PATEL

MGR

04/09/2005

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