

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032914

FILED
Feb 27, 2004
Secretary of State

Entity Name: SNS HEALTHCARE TECHNOLOGY GROUP, LLC

Current Principal Place of Business:

6605 JOG PALM DRIVE
BOYTON BEACH, FL 33437

New Principal Place of Business:

304 NORTH COUNTRY CLUB DRIVE
ATLANTIS, FL 33462

Current Mailing Address:

PO BOX 741543
BOYTON BEACH, FL 33474

New Mailing Address:

PO BOX 5809
LAKE WORTH, FL 33466

FEI Number: 41-2084964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARY, STAFFORD
6605 JOG PALM DRIVE
BOYTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

GARY, STAFFORD
304 NORTH COUNTRY CLUB DRIVE
ATLANTIS, FL 33462 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: GARY STAFFORD

02/27/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: STRAHAN, HERMAN
Address: 6650 JOG PALM DR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: MGR () Delete
Name: STAFFORD, GARY
Address: 6650 JOG PALM DR
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STRAHAN, HERMAN
Address: 304 NORTH COUNTRY CLUB DRIVE
City-St-Zip: ATLANTIS, FL 33462

Title: MGR (X) Change () Addition
Name: STAFFORD, GARY
Address: 304 NORTH COUNTRY CLUB DRIVE
City-St-Zip: ATLANTIS, FL 33462

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: GARY STAFFORD

MGMR

02/27/2004

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