

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033007

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: HEALTHCARE ADVANTAGE, LLC

**Current Principal Place of Business:**

861 SW 78TH AVENUE  
SUITE 200  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

861 SW 78TH AVENUE  
SUITE 200  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 41-2072001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSENTHAL, JANIS ESQUIRE  
861 SW 78TH AVE  
SUITE 200  
PLANTATION, FL 33324 US

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

HERRERA, CARLOS M D  
861 SW 78TH AVE  
SUITE 200  
PLANTATION, FL 33324 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

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CONSUMER DIRECTED HE, ALTHPLANS, INC .  
Address: 861 SW 78TH AVE, STE 200  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

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

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 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: CARLOS M HERRERA

D

04/30/2008

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