

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016936

FILED
Apr 29, 2004
Secretary of State

Entity Name: HEALTH CARE PRODUCTS INTERNATIONAL, LLC

Current Principal Place of Business:

160 INTERNATIONAL PARKWAY, SUITE 140
HEATHROW, FL 32746

New Principal Place of Business:

1055 MAITLAND CENTER COMMONS
100
MAITLAND, FL 32751 US

Current Mailing Address:

160 INTERNATIONAL PARKWAY, SUITE 140
HEATHROW, FL 32746

New Mailing Address:

1055 MAITLAND CENTER COMMONS
100
MAITLAND, FL 32751 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R JR
315 E. ROBINSON STREET, SUITE 600
ORLANDO, FL 32801 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MCCLANDON, JOEANN
Address: 1055 MAITLAND CENTER COMMONS
City-St-Zip: MAITLAND, FL 32751 US

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: JOEANN MCCLANDON MGR 04/29/2004

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