2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046534

City-St-Zip: MIAMI, FL 33132

Entity Name: HEALTHCARE AMERICA ASSOCIATES, LLC

FILED Jul 25, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Pla	New Principal Place of Business:	
701 BRICK SUITE 250 MIAMI, FL				
Current Mailing Address:		New Mailing Addr	New Mailing Address:	
701 BRICK SUITE 250 MIAMI, FL				
	: 20-1414116 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the limited liability		Certificate of Status Desired () tice.	
Name and	I Address of Current Registered Agen	t: Name and Address	s of New Registered Agent:	
555 NE 15 SUITE 100 MIAMI, FL	33132 US			
	e named entity submits this statement for e of Florida.	the purpose of changing its registe	ered office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered	l Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete MURPHY, JAMES J 1801 S NOVA RD SUITE 110 S DAYTONA, FL 32119	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete BURSTEIN, JACK 701 BRICKELL AVE SUITE 2500 MIAMI, FL 33131	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete SE INVESTMENTS, LLC, 555 NF 15 ST SUITE 100	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JASON BURSTEIN MGRM 07/25/2007