

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065166

FILED
Apr 30, 2007
Secretary of State

Entity Name: WOMEN'S HEALTH PLAN NETWORK LLC

Current Principal Place of Business:

2705 SW 22ND AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2705 SW 22ND AVENUE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 20-3076351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, CHRISTOPHER
2705 SW 22ND AVE
MIAMI, FL 33133 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/MANAGERS:

Title: MGR () Delete
Name: SHIELDS, ELIZABETH L
Address: 165 EAST 72ND STREET
City-St-Zip: NEW YORK, NY 10021

Title: MGR () Delete
Name: NELSON, CHRISTOPHER
Address: 2705 SW 22ND AVE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

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 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: CHRISTOPHER NELSON

MGR

04/30/2007

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