

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000051364

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** CARDIOHEALTH SLEEP CENTER OF NORTH TAMPA, LLC

**Current Principal Place of Business:**

14499 NORTH DALE MABRY HIGHWAY  
SUITE 270  
TAMPA, FL 33618 US

**New Principal Place of Business:**

13089 TELECOM PARKWAY NORTH  
TEMPLE TERRACE, FL 33637 US

**Current Mailing Address:**

14499 NORTH DALE MABRY HIGHWAY  
SUITE 270  
TAMPA, FL 33618 US

**New Mailing Address:**

13083 TELECOM PARKWAY NORTH  
TEMPLE TERRACE, FL 33637 US

**FEI Number:** 06-1781690

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

HEALTHSLEEP, INC  
13083 TELECOM PARKWAY NORTH  
TEMPLE TERRACE, FL 33637 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: FREDERICK DUGUAY, CFO

04/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CARDIOHEALTH SLEEP I, NC.  
Address: 14499 N. DALE MABRY HWY STE 270  
City-St-Zip: TAMPA, FL 33618 US

Title: MGR (X) Delete  
Name: ADVANCED CARDIAC MAN, AGEMENT, LLC.  
Address: 14499 N. DALE MABRY HWY, STE 270  
City-St-Zip: TAMPA, FL 33618 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HEALTHSLEEP, INC.,  
Address: 13083 TELECOM PARKWAY NORTH  
City-St-Zip: TEMPLE TERRACE, FL 33637 US

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: FREDERICK DUGUAY

CFO

04/28/2008

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