

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000001259

Entity Name: REAL TIME HEALTH QUOTES LLC

FILED
Mar 03, 2008
Secretary of State

Current Principal Place of Business:

14033 N. DALE MABRY HWY
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

14033 N. DALE MABRY HWY
TAMPA, FL 33618

New Mailing Address:

FEI Number: 20-8018424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OHMAN, JOEL J
14007 BRUCE B. DOWNS BLVD., #106
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

OHMAN, JOEL J
3003 BARNHARD DRIVE
#117
TAMPA, FL 33613 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:

03/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OHMAN, JOEL J
Address: 14007 BRUCE B. DOWNS BLVD., #106
City-St-Zip: TAMPA, FL 33613

Title: MGRM () Delete
Name: CARDINALE, FREDERICK P
Address: 14003 N. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OHMAN, JOEL J
Address: 3003 BARNHARD DRIVE #117
City-St-Zip: TAMPA, FL 33613

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: JOEL J OHMAN

MGRM

03/03/2008

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