2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000034703

Entity Name: HEALTH OUTCOMES SOLUTIONS, LLC.

FILED Jun 12, 2008 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

2351 VIA TUSCANY

WINTER PARK, FL 32789 US

Current Mailing Address: New Mailing Address:

2351 VIA TUSCANY

PO BOX 2343 WINTER PARK, FL 32789 US WINTER PARK, FL 32790 US

FEI Number: 20-8757113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MATHIAS, SUSAN MATHIAS, SUSAN D PRES 2351 VIA TUSCANY 2351 VIA TUSCANY

WINTER PARK, FL 32789 WINTER PARK, FL 32789 US 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: SUSAN D MATHIAS 06/12/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: **PRES** (X) Change () Addition

MATHIAS, SUSAN D PRES MATHIAS, SUSAN Name: Name: Address: 2351 VIA TUSCANY Address: 2351 VIA TUSCANY

City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: WINTER PARK, FL 32789 US

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: SUSAN D MATHIAS **PRES** 06/12/2008