

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000101512

FILED
Jun 24, 2009
Secretary of State

Entity Name: HOVERMAN HEALTHCARE SOLUTIONS, LLC

Current Principal Place of Business:

16221 SIERRA DE AVILA
TAMPA, FL 33618

New Principal Place of Business:

16221 SIERRA DE AVILA
TAMPA, FL 33613

Current Mailing Address:

16221 SIERRA DE AVILA
TAMPA, FL 33618

New Mailing Address:

16221 SIERRA DE AVILA
TAMPA, FL 33613

FEI Number: 26-1187707 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:

WALTUCH, ROBERT H
501 E. KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

WALTUCH, ROBERT H
100 SOUTH ASHLEY
1500
TAMPA, FL 33602 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:

06/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOVERMAN, KEN L
Address: 16221 SIERRA DE AVILA
City-St-Zip: TAMPA, FL 33613 US

ADDITIONS/CHANGES:

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: KEN HOVERMAN

MR

06/24/2009

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