

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108839

FILED
Apr 30, 2008
Secretary of State

Entity Name: TAMPA HEALTH PARTNERS, LLC

Current Principal Place of Business:

C/O NICHOLAS GALANTINO, ESQ.
2605 WEST SWANN AVE.
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

C/O NICHOLAS GALANTINO, ESQ.
2605 WEST SWANN AVE.
TAMPA, FL 33609

New Mailing Address:

FEI Number: 26-1145449

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 AVE.
TALAHASSEE, FL 32301 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: COO () Delete
Name: GALANTINO, NICHOLAS
Address: 2605 WEST SWANN AVENUE
City-St-Zip: TAMPA, FL 33609

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: GALANTINO, NICHOLAS

COO

04/30/2008

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