

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115256

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: SECURESYNERGY HEALTH, LLC

**Current Principal Place of Business:**

3475 WILLOW LAKE BOULEVARD  
SUITE 500  
VADNAIS HEIGHTS, MN 55110 US

**New Principal Place of Business:**

**Current Mailing Address:**

3475 WILLOW LAKE BOULEVARD  
SUITE 500  
VADNAIS HEIGHTS, MN 55110 US

**New Mailing Address:**

FEI Number: 26-0680224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 NORTH ORANGE AVENUE  
SUITE 1400  
ORLANDO, FL 32801 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: MGR ( ) Delete  
Name: GRAHAM, DALE  
Address: 3475 WILLOW LAKE BOULEVARD, SUITE 500  
City-St-Zip: VADNAIS HEIGHTS, MN 55110 US

Title: MGR ( ) Delete  
Name: ROHRIG, KURT  
Address: 3475 WILLOW LAKE BOULEVARD, SUITE 500  
City-St-Zip: VADNAIS HEIGHTS, MN 55110 US

Title: MGR ( ) Delete  
Name: CHAFFEE, ROBERT  
Address: 3745 WILLOW LAKE BOULEVARD, SUITE 500  
City-St-Zip: VADNAIS HEIGHTS, MN 55110 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DALE A, GRAHAM

MGR.

04/28/2008

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