2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000010866

Entity Name: PROMETHEUS HEALTHCARE INFORMATICS (PHI), LLC

FILED Apr 15, 2009 Secretary of State

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

2115 CRYSTAL GROVE DR. 2035 ATHENIA WAY

LAKELAND, FL 33801 US LAKELAND, FL 33813 US

Current Mailing Address: New Mailing Address:

2115 CRYSTAL GROVE DR. LAKELAND, FL 33801 US

FEI Number: 26-2954543 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARICHAL, DAVID J
2115 CRYSTAL GROVE DR.
2035 ATHENIA WAY
LAKELAND EL 23201 LIS

LAKELAND, FL 33801 US LAKELAND, FL 33813 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: DAVID J. MARICHAL 04/15/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 MARICHAL, DAVID J
 Name:
 MARICHAL, DAVID J

 Address:
 2115 CRYSTAL GROVE DR.
 Address:
 2035 ATHENIA WAY

 City-St-Zip:
 LAKELAND, FL 33801 US
 City-St-Zip:
 LAKELAND, FL 33813 US

Title: MGR () Delete Title: () Change () Addition

 Name:
 TEJEDA, SALVADOR
 Name:

 Address:
 2115 CRYSTAL GROVE DR.
 Address:

 City-St-Zip:
 LAKELAND, FL 33801 US
 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: DAVID J. MARICHAL PD 04/15/2009