

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000093827

**FILED**  
**Apr 03, 2010**  
**Secretary of State**

**Entity Name:** HEALTHCARE RECORDS COMPLIANCE, LLC

**Current Principal Place of Business:**

1920 NE 1ST TER SUITE 112  
WILTON MANORS, FL 33305 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 24118  
OAKLAND PARK, FL 33307

**New Mailing Address:**

**FEI Number:** 26-3552026

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRIEDMAN, RICH  
1920 NE 1ST TER  
SUITE 112  
WILTON MANORS, FL 33305 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:** MGRM  
**Name:** GONZALEZ, EDWARD  
**Address:** 1920 NE 1ST TER SUITE 112  
**City-St-Zip:** WILTON MANORS, FL 33305 US

I hereby 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: EDWARD GONZALEZ

MGRM

04/03/2010

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