

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000110325

FILED
Jan 23, 2010
Secretary of State

Entity Name: HEALTHCARE ADVISORS LLC

Current Principal Place of Business:

1515 S. FEDERAL HWY.
404
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

300 EAST OAKLAND PARK BLVD.
382
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ANDERSON, HAL
1515 SOUTH FEDERAL HWY
404
BOCA RATON, FL 33432 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: ANDERSON, HAL
Address: 300 EAST OAKLAND PARK BLVD. #382
City-St-Zip: OAKLAND PARK, FL 33334

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: HAL ANDERSON

MGRM

01/23/2010

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