

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 08, 2011
Secretary of State

Entity Name: HEALTHCARE INFORMATION TECHNOLOGIES, LLC

Current Principal Place of Business:

2740 SW MARTIN DOWNS BLVD.
SUITE 262
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

2740 SW MARTIN DOWNS BLVD.
SUITE 262
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 27-1816026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAZI, RYAN S ESQ.
217 EAST OCEAN BLVD
STUART, FL 34994 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: GRICE, GREGORY S
Address: 699 BAY ESPLANADE
City-St-Zip: CLEARWATER, FL 33767

Title: MGRM
Name: POPE, CHARLES H JR
Address: 2149 SW OLYMPIC CLUB TERRACE
City-St-Zip: PALM CITY, FL 34990

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: CHARLES POPE

MGRM

01/08/2011

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