

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002223

FILED
Apr 09, 2012
Secretary of State

Entity Name: ALLSCRIPTS HEALTHCARE, LLC

Current Principal Place of Business:

8529 SIX FORKS RD
RALEIGH, NC 27615

New Principal Place of Business:

Current Mailing Address:

222 MERCHANDISE MART PLAZA
2024
CHICAGO, IL 60654

New Mailing Address:

FEI Number: 56-1306083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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
Name: SHAPIRO, LEE
Address: 222 MERCHANDISE MART PLAZA, STE 2024
City-St-Zip: CHICAGO, IL 60654

Title: MGR
Name: WILLIAM, DAVIS
Address: 222 MERCHANDISE MART PLAZA, STE 2024
City-St-Zip: CHICAGO, IL 60654

Title: VP
Name: BAKER, LISA D
Address: 8529 SIX FORKS ROAD
City-St-Zip: RALEIGH, NC 27615 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: LEE SHAPIRO

MGR

04/09/2012

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