2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006290

Entity Name: HEALTHEDGE INVESTMENT MANAGEMENT, LLC

FILED Apr 09, 2007 Secretary of State

2905 BAYSHORE BLVD., SUITE 200 100 S. ASHLEY DRIVE, SUITE 650

TAMPA, FL 33629 TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

2905 BAYSHORE BLVD., SUITE 200 100 S. ASHLEY DRIVE, SUITE 650

TAMPA, FL 33629 TAMPA, FL 33602

FEI Number: 16-1740261 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:

DINGLE, PHILLIP S DINGLE, PHILLIP S

2905 BAYSHORE BLVD., SUITE 200 100 S. ASHLEY DRIVE, SUITE 650

TAMPA, FL 33629 US TAMPA, FL 33602 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.

ADDITIONS/CHANGES:

(X) Change () Addition

Title:

SIGNATURE: 04/09/2007

Clashania Olimahura of Davishand Asant

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete

Name: BLUE, HAROLD S Name: BLUE, HAROLD S Address: 2905 BAYSHORE BLVD., SUITE 200 Address: 100 S. ASHLEY DRIVE, SUITE 650

City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33602

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

Name: DINGLE, PHILLIP S Name: DINGLE, PHILLIP S

Address: 2905 BAYSHORE BLVD., SUITE 200 Address: 100 S. ASHLEY DRIVE, SUITE 650

City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33602

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: ANDERSON, BRIAN W Name: ANDERSON, BRIAN W

Address: 2905 BAYSHORE BLVD., SUITE 200 Address: 100 S. ASHLEY DRIVE, SUITE 650

City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33602

City-31-Zip. TAIVIFA, FL 33029 City-31-Zip. TAIVIFA, FL 3300.

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

 Name:
 Name:
 BRODSKY, BERT E

 Address:
 Address:
 26 HARBOR PARK DRIVE

 City-St-Zip:
 City-St-Zip:
 PORT WASHINGTON, NY 11050

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

Name: Name: PATEL, KIRAN C

Address: Address: 5600 MARINER STREET, SUITE 200

City-St-Zip: City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the 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: PHILLIP S. DINGLE MGRM 04/09/2007