

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006109

FILED
Jan 18, 2010
Secretary of State

Entity Name: AMERI-PLUS BENEFIT PROGRAM, LLC

Current Principal Place of Business:

2536 COUNTRYSIDE BLVD, 6TH FLOOR
CLEARWATER, FL 33763

New Principal Place of Business:

2536 COUNTRYSIDE BLVD STE 501
CLEARWATER, FL 33763

Current Mailing Address:

2536 COUNTRYSIDE BLVD, 6TH FLOOR
CLEARWATER, FL 33763

New Mailing Address:

2536 COUNTRYSIDE BLVD, STE 501
CLEARWATER, FL 33763

FEI Number: 26-1195416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHTOWER, R NATHAN ESQ
2536 COUNTRYSIDE BLVD, 6TH FLOOR
CLEARWATER, FL 33763 US

Name and Address of New Registered Agent:

HIGHTOWER, NATHAN R ESQ
2536 COUNTRYSIDE BLVD, STE 501
CLEARWATER, FL 33763 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.

SIGNATURE: NATHAN R HIGHTOWER ESQ

01/18/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: AL NETOWRK SOLUTIONS, L.L.C.
Address: 2536 COUNTRYSIDE BLVD, STE 501
City-St-Zip: CLEARWATER, FL 33763

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: AL NETWORK SOLUTIONS LLC

MGR

01/18/2010

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