

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002198

FILED
Apr 19, 2012
Secretary of State

Entity Name: HEALTHCARE SUPPORT ADMINISTRATORS, INC.

Current Principal Place of Business:

3700 WASHINGTON STREET
SUITE 304
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3700 WASHINGTON STREET
SUITE 304
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 26-1698616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORLOWSKY, JASON M
3700 WASHINGTON STREET
SUITE 304
HOLLYWOOD, FL 33021 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

OFFICERS AND DIRECTORS:

Title: P,S
Name: ORLOWSKY, JASON M
Address: 3700 WASHINGTON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP,T
Name: ORLOWSKY, EVAN J
Address: 3700 WASHINGTON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP
Name: ORLOWSKY, NACHMAN
Address: 3700 WASHINGTON STREET #304
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JASON ORLOWSKY

PRES

04/19/2012

Electronic Signature of Signing Officer or Director

Date